141

McDonnell Douglas - St. Louis, MO

MOD000818963

MOD000818906

Date mailed:

October 14, 1987

Date received:

October 16, 1987

Response received:

November 11, 1987

Categorization:

2

McDonnell Douglas has apparently submitted the responses for both the ID numbers indicated above in one package. However, the facility has not distinguished between the two in the response. McDonnell Douglass has stated that they generate an average of 848 lbs/mo of a methylene chloride based solvent used in coating removal operations. They generate, on average, 18,518 lbs/mo of chlorinated solvent they call F001, F002. These come from metal cleaning and paint removal operations. Finally, they generate 39,763 lbs/mo of what they call flammable solvents and designate as D001, F003, F005. The wastes are stored in 55 gallon drums and transported to their in-house Hazardous Waste Storage Facility. Although the response does not say, observation of manifests indicates this is MOD000818963. The drums are then sent to LWD, Inc. in Calvert City, KY for incineration. Also, the facility has recently begun sending waste to Safety-Kleen in St. Charles, MO. Follow-up has been recommended for several reasons. Both of the subject ID numbers manifest shipments to LWD. The stated rates of generation are apparently for both facilities. Since MOD000818906 also manifests to MOD000818963 as do several other McDonnell Douglass ID numbers it is not completely clear where each stands in the waste generation process. Although the facility is identifying it's wastes as F-listed, it is unclear how these determinations are being made as included analyses are not specific concerning waste constituents. Finally, no information was provided concerning notification to the TSD of the land disposal restricted waste treatment standards. It is noted that the facility was one day late in it's response submittal.

R00148152

RCRA RECORDS CENTER

27.080 McDonnell Douglas
Tract I

JOHN ASHCROFT

Governor

FREDERICK A. BRUNNER

Director



Division of Energy
Division of Environmental Quality
Division of Geology and Land Survey
Division of Management Services
Division of Parks, Recreation,
and Historic Preservation

STATE OF MISSOURI

DEPARTMENT OF NATURAL RESOURCES

DIVISION OF ENVIRONMENTAL QUALITY

St. Louis Regional Office 8460 Watson Road, Suite 217 St. Louis, MO 63119 314-849-1313

September 24, 1987

LOW # 87-SL.047

Mr. Robert Kaatman, Section Manager Environmental Compliance

- McDonnell Douglas Corporation Department 891C, Building 80 Level 2, Post C-2 P. O. Box 516 St. Louis, Missouri 63166



WASTE MANAGEMENT PROGRAM

Dear Mr. Kaatman:

Enclosed please find a report of an inspection conducted by Mr. Joe Haake of my staff. Please note that under the section titled "UNSATISFACTORY FEATURES" are findings requiring corrections be taken. The section titled "RECOMMENDATIONS" outlines the steps the inspector has determined will correct the violations noted in the report.

In order to document that corrective actions have been taken you are requested to submit a written response no later than November 15, 1987. The response should describe the steps taken to correct each Unsatisfactory Feature identified. Please direct the response to my attention.

It is our purpose by this letter to persuade you to take all necessary actions to comply with the Missouri Hazardous Waste Management Law. Failure to provide the written response as requested may result in the issuance of a Notice of Violation. Failure to achieve timely resolution of violations may result in the referral of this case for enforcement by the Waste Management Program.

Should you have any questions, or wish to confer in this matter, please contact me.

Sincerely,

DEPARTMENT OF NATURAL RESOURCES

Walt Puryear

Chief, Waste Management Unit

St. Louis Regional Office

WP:mc Encl.

CC: Central Office - WMP

27.080 McDonnell Douglas Corp. Tract I

JOHN ASHCROFT

FREDERICK A. BRUNNER

Director



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St. Louis Regional Office 8460 Watson Road, Suite 217 St. Louis, MO 63119 314-849-1313

HAZARDOUS WASTE COMPLIANCE INSPECTION REPORT

FACILITY

McDonnell Douglas Corporation Department 891C, Building 80 Level 2, Post C-2 P. O. Box 516 St. Louis, Missouri 63166 (314) 232-3319 MDNR GENERATOR ID#: 01001 U. S. EPA ID#: MOD000818963 FACILITY PERMIT #: 0SO 062284 002

Mr. Robert Kaatman - Section Manager, Environmental Compliance

INTRODUCTION

An inspection of the McDonnell Douglas Corporation (MDC) - Tract I facility was conducted on September 17, 1987, to assess compliance with the hazardous waste facility permit and applicable requirements pursuant to the Resource Conservation and Recovery Act and the Missouri Hazardous Waste Management Law. Mr. Joe Haake, Environmental Specialist, represented the Missouri Department of Natural Resources - St. Louis Regional Office. Messrs. Robert Kaatman and Brian Kury of the Environmental Compliance Section represented the facility.

INTRODUCTION

The MDC - Tract I facility is primarily a manufacturing site for high technology aerospace products including military aircraft, space systems, and missiles. Hazardous wastes generated at the facility are those associated with the fabrication of aluminum, titanium, composite structures, and other materials used in the manufacture of items such as airframes. A total of forty-nine (49) hazardous waste streams, which are registered with the Missouri Department of Natural Resources, continues to be generated at the site. These waste streams include acid and altaline solutions, halogenated and non-halogenated solvents; paint sludges and solids, pretreatment sludges, cyanide solutions, explosives, jet fuel, oil, and miscellaneous laboratory chemicals.

The Tract I facility is a fully permitted TSD facility and utilizes a variety of tanks for storage of hazardous waste. Containerized hazardous waste is also stored at the site. The containerized waste storage area is designated as the site which manages the drummed hazardous waste from each of the ten (10) other MDC generators located in the metropolitan

St. Louis area. Wastes generated at these sites are transported to the Tract I area via licensed MDC vehicles.

Hazardous waste in storage at the facility is eventually hauled by licensed transporters to off-site disposal or resource recovery facilities. The contractors currently used are as follows:

- 1. Heritage Environmental Service in Indianapolis, Indiana.
- 2. L. W. D., Inc., in Calvert City, Kentucky.
- 3. Peoria Disposal Company in Peoria, Illinois.
- 4. Chemical Waste Management in Emelle, Alabama.
- 5. Trade Waste Incineration, Inc., in Sauget, Illinois.
- 6. Rollins Environmental Services in Deer Park, Texas.
- 7. Kiesel Oil Company in St. Louis, Missouri.

No process changes have occurred since the issuance of the hazardous waste facility permit. Reference should be made to the MDC permit application for a complete description of the permitted storage components and generated hazardous wastes.

UNSATISFACTORY FEATURES

- 1. The leak detection systems for underground storage tanks were not operational as required by 10 CSR 25-7.264(2)(J)4.
- 2. Resource recovery certification had not been applied for as required by 10 CSR 25-9.010(1)(C).
- 3. The facility contingency plan was not current as required by 10 CSR 25-7.264(2)(D) incorporating by reference 40 CFR 264.54.

DISCUSSION

Approximately eighty-two (82) 55-gallon drums and several 5-gallon carboys of corrosive hazardous waste were observed in section 1 of container storage area 1. Section 2 of container storage area 1 contained approximately one hundred twelve (112) 55-gallon drums of waste oil and sixty-nine (69) 55-gallon drums of waste solvent, paint sludge, and other hazardous waste. A total of twenty-four (24) 55-gallon drums of cyanide and sulfide waste were present in container storage area 2. No waste was observed in container storage area 3. The storage of containerized waste appeared to be in accordance with the facility permit.

An inspection of the tank storage areas revealed that the six (6) 750-gallon and five (5) 500-gallon aboveground tanks for storage of waste nitric acid and hydrofluoric acid generated in the milling of steel and titanium at building 52 had been removed. The five (5) 500-gallon tanks were replaced with three (3) 850-gallon aboveground tanks.

It was also observed during the inspection of tank storage areas that the leak detection systems for tanks at fuel pit 3 and 4, tanks at ramp station 1 and 2, the F-18 silencer tank, and the hush house tank were not operational. Inspection records indicated that the systems had not been functioning since July 1987. It was explained that the ground water probes were damaged and could not be replaced due to discontinuance by the manufacturer. The facility is in the process of purchasing new leak detection systems.

During chemical milling operations a maskant is applied to metal parts. As the maskant dries the perchloroethylene carrier evaporates and is captured in a vapor recovery hood. The hood discharges to a carbon absorption unit. The captured perchloroethylene is then stream stripped from the carbon, the water is separated out, and the perchloroethylene is recovered as pure solvent. The recovered perchloroethylene is returned, for use as an ingredient in new maskant, to the company that manufactures the maskant material.

In a letter dated February 2, 1987, to Mr. Robert Kaatman, Supervisor, Environmental Compliance - MDC from Mr. Kenneth Davis, Chief, Data Management Unit - Missouri Department of Natural Resources, it was explained that the captured perchloroethylene is a sludge defined by 40 CFR 260.10 because it is a waste generated by an air pollution control facility. Also, in accordance with 40 CFR 261.2 a sludge is a solid waste when reclaimed. Since the captured perchloroethylene is a hazardous waste the recovery of the waste is considered a resource recovery operation, and certification from Missouri Department of Natural Resources must be obtained. At the time of the inspection resource recovery certification had not been applied for.

A review of the facility contingency plan revealed that the list of emergency coordinators was not up to date. Mr. Kaatman stated that the plan was currently being revised. All other required records were found to be in compliance with permit conditions and applicable state and federal regulations.

RECOMMENDATIONS

- 1. Repair or replace the leak detection system for underground tanks.
- 2. Submit a resource recovery application for the certification of the perchloroethylene recovery operation.
- 3. Amend the facility contingency plan to include a current list of emergency coordinators.
- 4. Submit certification that the six (6) 750-gallon and five (5) 500-gallon aboveground hazardous waste storage tanks were removed in accordance with the approved facility closure plan. The certification must be signed by the owner/operator and an independent professional engineer.

APPROVED BY:

FDM/JH/mc

F. Donald Maddox

Regional Administrator

St. Louis Regional Office

Joe Haake

PREPARED BY

Environmental Specialist

St. Louis Regional Office

HAZARDOUS WASTE PERMITTED TSD FACILITY Date: 9-/7-87 GENERATOR CHECKLIST

Name of Facility: McDonusia Douglas Corp. MO Permit # 050 062284 002 Address: P.O. Box 516 MO I.D. # 0/00/ ST. LOUIS MISSOURI 63166 EPA I.D. # 100000818963 Contact: MR. ROBERT KAATMAN Phone No.: 3/4-232-33/9 Transporter? YES , # Holo39 , Resource Recovery? YES , # ___ Provide a brief description of the manufacturing process: MANUFACTURING-OF HIGH TECHNOLOGY AEROSPACE PRODUCTS INCLUDING MILITARY FIGHTER AIRCRAFT, SPACE SYSTEMS, AND MISSILES. PROCESSES INCLUDE METAL CUTTING MILLING FORMING GRINDING, AND ELECTROPHYTING: DEGREASING : PAINTING : CHEINICAL PROCESSING : AND AIRCRAFT FUELING OPERATIONS. Describe any new processes added since permit issuance: NowE Any new waste streams? NO WASTE MANAGEMENT PROGRAM General comments and observations: THE SIX 750 GALLON ABOUE GROUND STORAGE TANKS (H-1 THROUGH H-6) AIND THE FIVE EDO GALLON AROVE GROUND STORAGE TANKS (H-12 THROUGH H-16) HAVE BEEN REMOVED. THE FIVE 500 GALLON TANKS WERE REPLACED WITH THREE 850 GALLON ABOVE GROUND PANKS.

· List	t the hazardous was	stes produced:			·
*	Waste	Amount/month	Kilogram/month	I.D. #	Disposition
1.	49 SEPARATE	2 42600 68	2/9369		LANDFILL
2. 2	HAZARDOUS WASTE	~43571 LB	219805		INCINERATION
з	STREAMS	2456583 LB	~201537		TREATMENT
4.		109150 LB	2 49613		RESOURCE RECOVERY
5.					
•••			~ 296324 KG		
Sub	tract amount going	to Resource Re	ecovery or sewer	249613KG	
Amo	unt subject to gen	erator fee (KK0	3) ~246.711		
(su	bject if over 2000	lbs. of waste	is produced per	year)	
ls	generator fee appl	icable to this	facility? Yes	No	
11	so, is the fee bei	ng paid? Yes	No		
		,			
	IFESTS (10 CSR 25-	5.010(4))			
田 2.	Cenerator's Misso Serially increasi	ouri and EPA I. ng shipment nu	D. Number mber		
3.	Generator's name, All transporter's	address, phone	e number. EPA I.). number	A I.D. numbers
	Hazardous waste m	anagement faci	lity name, addres	ss, phone	number, and EPA
6.	Proper DOT shippi	ng name and ha	zard class	aina shinr	ned
g/8:	Quantity, contain Emergency instruct	tion and specia	al handling proce	edures	<i>,</i>
10.	Proper certificat Manifest properly Time between gene	signed and da	ted	aa than 1	O days
<u>12.</u>	Copy to generator	in 30 days	irty Signature it	ess than i	o days
14.	Copy to generator If not, exception Completed, manifes	ts submitted t	ort submitted wit o Department quai	thin 45 da rterly	iys
₩ 15.	Copy at Tacility	for three (3)	years		
		Commen	ts on manifests		
	T. ***				
; —	and the second	· . !!			
-					
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·					
					,
	VI'AINERIZATION AND				ti
@ 1.	Waste properly co	ontainerized an site (5.010(6))	d labeled during	storage	if it is being
@ 2.	Are wastes stored accumulation (7.0	d at non-permit	ted locations ma	rked with	the date of
B 3.	Are wastes stored (7.050(2)(A))	at non-permit	ted locations st	ored for	less than 90 days
		11	<i>[</i>]		
Ins	spector's Name: _	Je Hank	<u>e</u>		
Tit	tle:	ESTIL		•	1
110	ice:	SLRO			

30,213,000

GENERAL INSPECTION CHECKLIST

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Waste Analysis Plan
1. Have the manufacturing processes at the facility changed since the permit was
                 issued (yes, blacken box)
Is procedure to contirm wastes received from off-site being followed
                 (7.011(3)(C)3.)
       Security (7.011(3)(D))
Thenty-four hour s
                 Twenty-four hour surveillance or provision 2 and 3
An artificial or natural barrier in good condition and provision 3
                 Restricted access at each entrance
                 Warning signs legible from 50' on all approaches
       General Inspection
Conduct an inspection using the facilities checklist

1. Does facility inspection schedule identify problems which could be expected (no,
Ø 1.
\\ \alpha \\ \al
                 Does the schedule inspect the following: (7.011(3)(E)2.)
a. monitoring equipment
b. safety and emergency equipment
                             security devices
                 c.
                 d.
                             operating and structural devices
       3.
                 Are inspections being conducted regularly and at the proper
                 (7.011(3)(E)1.)
                                                                                                                                                                           WASTE MANAGEMENT
Personnel Training (7.011(3)(F))

1. Have employees completed classroom or on-the-job training

2. Job title description and name of person filling position regularly updated

3. Written record or the type and amount of training given to each person

4. Documentation confirming that training has been given

5. Is there continuing training given (yearly update)

6. Are new employees trained within 6 months
        Predaredness and Prevention (7.011(4))
1. Internal communications or alarm system in operation
2. A device in the hazardous waste operation area cable
                 A device in the hazardous waste operation area cable of summoning emergency
                  assistance
345678
                 Portable fire extinguishers and fire control equipment
                  Spill control equipment and decontamination equipment
                 Adequate water supply Safety Equipment (lire blankets, gas masks, eye wash)
                  Access to communications or alarm when waste is being handled
                 Adequate aisle space at drum storage area
Arrangements with local authorities updated (ie: when a new emergency
coordinator is assigned is a new copy sent to local emergency authorities)
 Contingency Plan and Emergency Procedures

1. Contingency plan easily accessible

2. List of emergency coordinators up-to-date (7.011(5)(E)4.)

3. List of all emergency equipment up-to-date (7.011(5)(E)5.)
                  Check location of emergency equipment for several items on the above list (If
 [2/5.
                  cannot be located, blacken box)
                  Evacuation plan easily accessible or displayed
                  Has the contingency plan ever been implemented (no check box, yes blacken box)
        Manifests
For off-site facilities
 123345.
                 Manifests signed and dated (7.011(6)(A)1.)
Copy to transporter (7.011(6)(A)1.)
Copy to generator in 15 days (7.011(6)(A)1.)
Copy at facility for 3 years (7.011(6)(A)1.C.)
                   Are manifests in good systematic order
                  Are manifest discrepancies reported properly (7.011(6)(A)1.A. and B.)
 Recordkeeping
                  Operating record available (7.011(6)(B)1.)
                  Operating record must include the following: (7.011(6)(B)2.)
                   ü.
                               information from each manifest
                   b.
                               method of treatment, storage, or disposal for each hazardous waste and the
                               date accomplished
 10
                              location and quantity of each waste at the facility (verify several by field check) a description of each waste a description of the process that produced each waste
                  C.
                  d.
                   е.
                               applicable hazardous waste numbers
                  1.
                               weight or volume-density with units
                               methods, locations, and dates with reference to manifest numbers and/or
                   h.
                               chain of custodies
                   Volumes, dates removed, and disposition of leachate (7.011(6)(B)2.D.)
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	4. Records and results of monitoring, testing, and analysis performed
	(8.011(6)(B)2.E. and H.) 5. Summary reports on incidents requiring implementation of contingency plan (7.011(6)(B)2.F.)
90	6. Records of inspections (7.011(6)(8)2.G.) 7. Waste analysis records from off-site sources and notices of acceptance to
E C	generators (7.011(6)(B)2.1.) 8. All closure and post closure cost estimates (7.011(6)(B)2.J.) 9. A complete copy of the permit application (7.011(6)(B)2.K.)
a	10. Personnel training documentation (7.011(6)(B)2.L. and M.) 11. Record documenting refusal of arrangements from local emergency response
,,,,	authorities (7.011(6)(B)2.N.)
A A	Reporting 1. Monthly Facility Reports available and submitted (7.011(6)(C)1.A.) 2. Are wastes received and not manifested reported within fifteen (15) days (7.011(6)(C)1.D.)
B	2. Is the closure cost estimate kept at the site (7.011(8)(B)4.)
. a	Containers 1. Are ignitable or reactive waste located at least fifty feet (50') from the property line (7.050(3)(A)1.) 2. Containers in good condition(7.050(3)(C))
	4. Has the facility conducted and recorded the results from weekly inspections
	property line (7.050(3)(A)1.) Containers in good condition(7.050(3)(C)) Containers closed during storage(7.050(3)(E)1.) Has the facility conducted and recorded the results from weekly inspections (7.050(3)(E)) Is the containment system free from cracks or gaps (7.050(3)(G)2.A.) Is the present storage inventory in accordance with the permitted limits (permit condition)
U	7. Are any hazardous wastes stored outside the storage area (if no check, if yes blacken, these wastes must comply with 7.050(2)(A))
0	Tanks 1. If ignitable or reactive wastes are stored are they protected from any material
a	or condition which may cause the waste to ignite or react (7.050(4)(A)1.B.) 2. Does the leak detection system indicate leakage (if no check, if yes blacken) 3. Do uncovered tanks have sufficient freeboard (7.050(4)(D)2.B.)
0	4. Are tanks with overfilling control equipment tested once a day (7.050(4)(E)1.A.) 5. Is data from monitoring equipment recorded once each operating day
	(7.050(4)(E)1.B.) 6. For uncovered tanks is the freeboard checked at least once a day (7.050(4)(E)1.C.)
ر	7. Are the construction materials inspected weekly to detect corrosion, erosion and leaking fixtures or seams (7.050(4)(E)).D.) 8. Is the area immediately surrounding the tank inspected weekly to detect signs of leakage (7.050(4)(E)).E.)
NA	Surface Impoundments 1. Are inspections conducted weekly and after storms (7.060(3)(B))
	 Are overtopping control systems (unctioning properly (7.060(2)(B)) Has there ever been a sudden drop in the level of the impoundment (7.060(3)(B)2.)
	4. Have liquids been collected in the leachate collection and removal system (7.060(3)(B)3.)
2	 5. Is there any erosion or other signs of deterioration (7.060(3)(B)4.) 6. Do the surface impoundments have adequate freeboard as described in the permit (7.060(2)(B))
1/4	Groundwater Monitoring and Post-Closure Permits I. Wells in good condition, properly covered and locked
8	 Wells properly sealed to prevent surface infiltration Test pumps for faucets if present
ה ! ה	 Conduct cursory review of monitoring results and record last sampling date and last date results were submitted to the WMP/PS Are the Quality control/Quality Assurance Plans kept on-site
	Please mark boxes as shown below
	IN COMPLIANCE OR IN COOD CONDITION
	IN VIOLATION OR IN POOR CONDITION (Must be described in the report)
	Inspector's Name: of Hoake
	little: ESTT
	Officer

Child alter 6

CERTIFIED MAIL

RETURN RECEIPT REQUESTED

Mr. Jerome Patterson McDonnell Douglas Corp. Tri I P O Box 516 Dept. 191C St. Louis, MO 63166

RE: Request for Information

McDonnell Douglas Corp. Tri I St. Louis MOD000818963

REQUEST FOR INFORMATION

Dear Mr. Patterson:

Under Section 3007 of the Resource Conservation and Recovery Act (RCRA), Title 42 U.S.C. Section 6927, the Environmental Protection Agency (EPA) may require you to furnish information relating to your wastes and waste management practices. Pursuant to Section 3007 of RCRA, for the purposes of determining compliance and possible enforcement, EPA hereby requires that you respond to the following questions in writing within fifteen (15) days of receipt of this letter.

Sections 3004 (d) through (k) and (m) and Section 3005 (j) of RCRA, 42 U.S.C. Section 6924 (d) through (k) and (m) and Section 6925 (j), require the EPA to ban, subject to limitations, or restrict the land disposal of hazardous waste. Prohibitions and restrictions on the management of wastes containing specified solvents became effective on November 7, 1986 (51 Federal Register pg. 40636; November 7, 1987). These prohibitions and restrictions are set forth in 40 CFR Part 268 and in revisions to 40 CFR 260 through 265 and 270.

Your facility has notified the EPA pursuant to the requirements of RCRA that you facility manages hazardous waste as either a generator, transporter, and/or treatment, storage, and disposal facility. These wastes are potentially affected by the new land ban regulations.

Definitions

"You" or "your" refers to your facility, including its officers, employees, and consultants.

A solvent is defined as a substance used to solubilize (dissolve) or mobilize other constituents. A solvent is considered "spent" when it has been used and is no longer fit for use without being regenerated, reclaimed, or otherwise reprocessed. Examples of spent solvents include solvents that are being used as degreasers, cleaners, fabric scourers, diluents, extractants, and reaction and synthesis media. Manufacturing process wastes containing solvents are not spent solvents.

The definitions in RCRA and the RCRA regulations, 40 CFR Parts 260-271 apply.

Information Requested

- 1. The name of the person with your facility to contact regarding this request, including title, address, and telephone number.
- 2. State whether at any time after November 7, 1986, you generated, transported, treated, stored, and/or disposed of 1) F001, F002, F003, F004, and/or F005 wastes as defined at 40 CFR Part 261.31, and/or 2) D001 wastes as defined at 40 CFR 261.21, and/or 3) a mixture of any of the aforementioned wastes. If you are unable, based upon information immediately available to you, to determine the designation of your waste, provide information concerning solvent type wastes that you have generated or handled. Examples of solvent type wastes are given in the definitions section of this letter.
- 3. For each waste identified above, give the rate of generation in pounds per month (lbs./month).
- 4. For each waste identified above, please provide all chemical analyses, Material Safety Data Sheets, manufacturers information, and any other information used to characterize the waste.
- 5. For each waste identified above, provide a brief description of the generation, transportation, treatment, storage and/or disposal process(es).
- 6. For each waste identified above, provide information concerning how the waste was managed from the time the waste was generated or came into your possession up to its final disposition or the time the waste left your possession. This should include copies of all manifests, treatment standard notifications and certifications, servicing agreements, bills of lading, and invoices.

You may, if you desire, assert a business confidentiality claim covering part or all of the information submitted to, or reviewed by, EPA. Such a claim may be made by placing on (or attaching to) the information, at the time of its submittal to, or review by, EPA, a cover sheet, stamped or printed legend, or other suitable form of notice employing language such as "trade secret," "proprietary," or "company confidential." Allegedly confidential portions of otherwise non-confidential documents should be clearly identified and may be submitted separately to facilitate identification and handling by EPA. If confidential treatment is sought only until a certain date or until the occurrence of a certain event, the request should so state.

Information submitted for which a claim of confidentiality is made will be disclosed by EPA only to the extent and by the means authorized by the procedures specified in 40 CFR Part 2, Subpart B (1985), as amended by 50 Federal Register 51654 December 18, 1985. If no such claim is made when information is received by EPA, the information may be made available to the public without further notice.

Please note that you are required to submit this information within fifteen (15) days of receipt of this letter. The response must be submitted to Jacobs Engineering Group Inc., a designated contractor to the EPA. Specifically, you should submit your response to:

Jacobs Engineering Group Inc. Attn: Terry Hagen 8207 Melrose Drive, Suite 114 Lenexa, KS 66214

Should you require a longer period to respond to the information request, you may be granted, by EPA, a one-time extension of 15 days. To request an extension you must contact your EPA RCRA State Coordinator, Marc Rivas, at 913/236-2891.

Failure to respond to these questions within 15 days of receipt of this letter may subject you to an enforcement action under Section 3008 of RCRA, 42 U.S.C. Section 6928. Such enforcement action may include the assessment of penalties of up to \$25,000 for each day of noncompliance.

Should you have any questions concerning this matter, please contact Terry Hagen or Carla Rellergert at 913/492-9218.

Sincerely yours,

David A. Wagoner Director Waste Management Division

MCDONNELL AIRCRAFT COMPANY

Box 516, Saint Louis, Missouri 63166 (314) 232-0232

03 November 1987

RECEIVED REGION VII

NOV 1 1 1987

Jacobs Engineering Group Inc. 8207 Melrose Drive, Suite 114 Lenexa, Kansas 66214 Attention: Terry Hagen

REGISTERED MAIL - RETURN RECEIPT

Gentlemen:

The United States Environmental Protection Agency requested information on solvents used at our facility since 07 November 1986. The enclosed information is submitted to you in response to this request.

McDonnell Douglas Corporation - St. Louis generates the following solvent wastes.

- Methylene Chloride/Phenol/Formic Acid (F002): an average of 848 pounds per month is generated from coating removal operations.
- Chlorinated Solvents (F001, F002): an average of 18,518 pounds per month is generated from metal cleaning and paint removal operations.
- Flammable Solvents (D001, F003, F005): an average of 39,763 pounds per month is generated from metal cleaning and painting operations.

Each of these wastes is placed in 55-gallon drums, then transported by McDonnell Douglas to our in-plant Hazardous Waste Storage Facility. The drums are held at the storage facility until they are removed from the plant by a disposal firm under contract to McDonnell Douglas for incineration in a hazardous waste incinerator.

Enclosed are copies of analyses performed by independent laboratories under contract to McDonnell Douglas. Due to the very large quantity of waste solvents generated here, it was not possible to include every analysis report; instead, several representative reports on each wastestream are enclosed.

We have also included copies of all pertinent Hazardous Waste Manifests, Purchase/ Sales Agreements, and invoices.

Please contact us if additional information is needed.

Sincerely,

MCDONNELL AIRCRAFT COMPANY

Barbara ME Ku

B. E. McKee, Planner Environmental Compliance Dept. 891C, Bldg. 80 (314) 895-5236

Concur: R. H. Kaatman, Section Manager

Environmental Compliance

Dept. 891C

MCDONNELL DOUGL

CORPORATION

ection E Composition		
all other major compone	components of ints by weight	the waste and the concentration. List percentages.
jor Components	wt.3)	Extraction Procedure Concentration (ppm)
Methylene Chloride	75%	
Formic Acid	13%	
Pheno1	12%	
Physical State (Circle One): Sol Appearance and Odor: Dark		Slurry Liquid Compressed gos ent phenolic odor
	WILLII PUNY	
Specific gravity (Hopel) 1.18		8 by weight of volatiles at 600°C 98%
specific fleated (1150-1)		Boiling Point (°C) 45
Vapor density (Air-1) 1 by weight of volatiles at 100°C		par ress than 2
	92%	
ection G - Fire and Explosion Data		
Flashpoint (circle one, if applic D-93-77 or setaflash closed teste	able) - Pensky	y - Martens closed cup tester ASTM std. std. D-3278-73
Extinguish Hedia a dry		b. COg, c. Calcohol form,
d wate		e water spray.
Does not apply		
Does not apply		
Does not apply		
Does not apply ection H - Health Hezard Data . Effects of oper exposure	Corrosi	

from Missouri wastestream registration Methylene Chloride/Phenol/Formic Acid (F002)

ection		
eactivity Data:		
Unst	table X	Conditions to avoid Decomposes upon heating;
. Stability Stab	14	emits highly toxic fumes
. Incompatibility (m	materials to avoid)N	itrates, oxidizers, open flame
. Hezerdous	Nev Occur	Conditions to avoid
Polymerization	May Not Occur	
ection J		XL
pill or Leak Procedu	res:	,
teps to be taken in o	case material is rele	eased
Contain a	nd recover	
ection K		
pecial Protection In	formation:	•
. Respiratory Protect	ction (specific type	Chlorinated and acidic vapors
. Protective gloves		Rubber or PVC
. Eye Protection		Face shield
. Special Clothing	(specify type)	Rubber or PVC suit
5. Precautions to be Handle as corre flammable mate	osive poison;	nd storing do not store with oxidizers or
6. Other Precautions		
7. 24-hour emergency	phone number	(314) 232-0232
Section L		
Containerization:		0
Specify appropriate D 37M Drum with 2		s and placards required for transportation.
ZZZZ DI UIII WICH A	LUL LINET, COI	103146

Environmental Analysis, Inc.

3278 N. Lindbergh Blvd. · Florissant, MO 63033 · 314-921-4488

4724

MCDONNELL-DOUGLAS

PAGE NO : REPORT NO :

3 218**46**

DATE :

07/16/86

RESULTS OF ANALYSIS

|--|

LOG NUMBER		TEST	RESULTS OF ANALYSIS	UNITS OF EXPRESSION
704718	3906 VAN STRAAT 759 041	Flash Point (PM) Specific Gravity		deg. C
704719	3911 LA 240 PREDIP	Hexavalent Chromi Copper Flash Point (PM) Nickel pH Value Specific Gravity	547 >100 <5.0 0.71	% w/w mg Cu/l deg. C mg Ni/l pH Unit g/ml
704720	3914 PCK CG 120	Hexavalent Chromi Copper Flash Point (PM) Nickel pH Value Specific Gravity	9.00 >100 <0.05 8.72	% w/w mg Cu/l deg. C mg Ni/l pH Unit g/ml
704721	3915 CU SULFATE	Hexavalent Chromi Copper Flash Point (PM) Nickel pH Value Sulfates Specific Gravity	498 >100 0.11 12.68 0.65	% w/w mg Cu/l deg. C mg Ni/l pH Unit %SO4 w/ g/ml
704722	3916 PENWALT 949 STR	Chloride pH Value Phenols Specific Gravity	<0.01 1.71 57087 1.070	% w/w C pH Unit ug/g g/ml
704723	3918 CEE BEE A805	Aluminum Hexavalent Chromit Fluoride (elec.) Nitrate Nitrogen		mg Al/l % w/w % F w/w % HNO3



ATRACE, INC RIDER TRAIL NORTH Not CITY. MO 63045

PROJECT # 1005-01

CLIENT: McDONNELL DOUGLAS

DATE: 04-20-87

SITE I.D.	LAB #	SAMP. DATE	PARAMETER	CONC.	UNITS	DATE ANALY.
4726	AA00564	04/08/87	SPECIFIC GRAVITY	1.0212	g/cc at 4 C	04/13/87
			SILVER	<3	ug/l	04/16/87
			CADMIUM	19.2	mg/l	04/16/87
			LEAD	0.42	mg/l	04/16/87
			ARSENIC	10.4 (2)	mg/l	04/16/87
			SELENIUM	5.6 (2)	mg/l	04/16/87
			BARIUM	<0.005	mg/l	04/16/87
			CHROMIUM	0.2	mg/l	04/16/87
			LINDANE	< 0.83	ug/l	04/16/87
			ENDRIN	< 2.5	ug/l	04/16/87
			METHOXYCHLOR	< 4.2	ug/l	04/16/87
			TOXAPHENE	< 4.2	ug/l	04/16/87
			2,4-D	< 5	ug/l	04/15/87
			2,4,5-TP	< 2	ug/l	04/15/87
			рН	3.1	pH units	04/14/87
			FLASHPOINT	27.8	degrees cent.	04/14/87
			BROMINE	not analyzed	insuff. sample	
			MERCURY	not analyzed	insuff. sample	
**			ř.			
4727	AA00565	04/08/87	SPECIFIC GRAVITY	1.2492	g/cc at 4 C	04/13/87
			pH	0.0	pH units	04/14/87
			PHENOL	19,960	mg/1	04/17/87
			ORGANIC CHLORIDES	107.9	mg/l	04/17/87

Colorimetric hexavalent chromium procedure not applicable to these samples
due to interference from matrix (ie dark color).
Total chromium analysis will be ran, when possible, but will result in increased detection
limits due to large dilutions.

²⁾ Insufficient sample to reanalyze by graphite furnace method, high values may be due to emission problems during ICP analysis.

caTRACE, INC .15 RIDER TRAIL NORTH -EARTH CITY, MO 63045

PROJECT: 1005-01

CLIENT: McDONNELL DOUGLAS

DATE: 05/01/87

SITE I.	D.	LAB #	SAMPLE DATE	PARAMETER	CONC.	UNITS	DATE ANALY.	ANALYST	STANE METHC
4765	(4996)	AA01370	05/21/87 05/21/87	SPECIFIC GRAVITY FLASH POINT	0.811	e 4 degrees C degrees C	05/26/87 06/01/87	P.G. J.C.	213 101
4766	(4996)	AA01371	05/21/87 05/21/87	SPECIFIC GRAVITY FLASH POINT	0.831 <0	€ 4 degrees C degrees C	05/26/87 - 06/01/87	P.G.	213 101
4767	(4996)	AA01372	05/21/87 05/21/87	SPECIFIC SRAVITY FLASH POINT	0.884	€ 4 degrees C degrees C	05/26/97 06/01/87	P.G.	
4763	(4995) 	AA01373	05/21/87	SPECIFIC GRAVITY pH TITANIUM CHROMIUM SODIUM HYDROXIDE	. <.050	pH units mg/l mg/l	05/26/87 05/27/87 06/01/87 06/01/87 06/01/87	P.S. D.K. G.L. G.L.	213 42 30 30 30
4769	(4996)	AA01374	05/21/87	SPECIFIC GRAVITY pH ALUMINUM CHROMIUM	1.004 9.91 .700 .210	<pre>9 4 degrees C pH units</pre>	05/26/87 05/27/87 06/01/87 06/01/87	P.G. D.K. G.L. G.L.	213 42 30 30
4770	(4996)	AA01375	05/21/87	SPECIFIC SRAVITY pH ALUMINUM CHROMIUM SULFURIC AÇID	1.06 .986	@ 4 degraes C pH units mg/l mg/l % WST H2804	05/26/87 05/27/87 06/01/87 06/01/87 06/01/87	F.G. D.K. G.L. B.L.	213 42 30 30 30
4771	(4996)	AA01376	05/21/87	SPECIFIC GRAVITY pH PHENOL DRGANIC CHLORIDES	0.88 MATRIX NOT	@ 4 degrees C pH units APPLICABLE TO METHOD % WST C1(-)	05/26/87 05/27/87 05/27/87	D.K.	213 42 40
4772	(4996)	AA01377	05/21/87	SPECIFIC GRAVITY OH CHROMIUM SULFIDES INORGANIC NITRATES PHOSPHATES SULFATES	1.48 2.54 MATRIX NOT :	% WGT PO4(-3)	05/26/87 05/27/87 06/01/87 05/27/87 06/01/87 05/27/87	P.G. D.K. G.L. B.T. G.L. E.T.	213I 421 301 EPA 30 301 EPA 30

Carol XI. Byington

Sec	tion E Composition		
Com	position: List all the hazar all other major co	dous components of imponents by weight	the waste and the concentration. List percentages.
laj	or Components	(wt.3)	Extraction Procedure Concentration (ppm)
	Organic Halides	201-501	
	Hydrocarbons	509-809	
١.			
*			
	Solubility in water	18 1.	% by weight of volatiles at 600°C
	Solubility in water	18 7.	
	Specific gravity (H20-1)	1.25	Boiling Point (GC)
-	Vapor density (Air-1)		pH
	I by weight of volatiles at	100°C	
ec	tion G - Fire and Explosion C	Oata	
	Flashpoint (circle one, if a D-93-77 or setaflash closed	ipplicable) - Pensi tester method AST	y - Martens closed cup tester ASTM std. 1 std. D-3278-73
		dry chemical,	
			e water spray.
		other, specify _	
-	Does not apply		
ec	tion H - Health Hazard Data		
	Effects of over exposure	Anesthetic,	irritating, suffocating
	Emergency and First Aid proc consult physician		eyes with water;

from Missouri wastestream registration Chlorinated Solvents (F001, F002)

ec	tion [
lea	ctivity Data:				
			. T	Cond	tions to avoid
١.	Stability	Unstab Stable	19		
_			×		
2.	Incompatibili	ty (met	erials to avo	1d) .	
3.	Hazardous		May Occur May Not Occur		Conditions to avoid
	Polymerization	•	May Not Occur	×	
Sec	tion J				
Spi	III or Leak Pro	cedures	:	Contain	and recover
ŝte	ips to be taken	in cas	e material is	released	
Sec	tion K				
-					
Spe	cial Protectio	n Infor	mation:		
١.	Respiratory P	rotecti	on (specific	type)	Chlorinated solvent
2.	Protective gl	oves			Rubber or PVC
3.	Eye Protection	n			Pace shield
4.	Special Cloth	ing (sp	ecify type)		Rubber or PVC
5.	Precautions t	o be to	iken in handli	ng and stor	Ing
6.	Other Precaut	ions			
7.	24-hour emerg	ency pl	none number		(314) 232-0232
Se	ction L				
=					
	ntainerization:				42 F 404
Sp	ecify appropria	te DOT	containers, I	labels and p	lacards required for transportation.
1	used 17E d	rume			

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Environmental Analysis, Inc.

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MCDONNELL-DOUGLAS

PAGE NO :

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99.71

5.59

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RESULTS OF ANALYSIS

			· · · · · · · · · · · · · · · · · · ·		
LOG NUMBER	SAMPLE DESCRIPTION	TES		RESULTS OF ANALYSIS	UNITS OF EXPRESSION
11011021					
712101.	4803 041 CHL SOLV	Ar	ilver esenic	<0.050 0.200 0.29	mg Ag/l mg As/l % w/w
		B		1.4 6640 0.860	mg Ba/l BTU/lb mg Cd/l
		C) Re	admium /anide eactive Cyanides nromium	0.63	ug CN/g ug CN/g mg Cr/l
		E F	P TOXICITY P Silver	261.24 <0.005	Meth.No mg Ag/l
		EF	P Arsenic P Barium P Cadmium	0.021 0.254 0.036	mg As/l mg Ba/l mg Cd/l
		EF	Chromium Mercury Lead	0.77 <0.002 2.00	mg Cr/l mg Hg/l mg Pb/l
		. E.F	P Selenium lash Point (PM)	0.060 6 <0.020	mg Se/1 deg. C mg Hg/1
		Or Le	ercury rganic Chloride ead	9.12 15.5	% w/w mg Pb/l
		Pł	H Value nenols ulfides (dist.)		pH Unit ug/g ug S/g
		Se	ulfides (React.) elenium pecific Gravity	0.090	ug S/g mg Se/l g/ml
		To	otal Metals Prepotal Solids	97.87	% W/W % W/W



8 W/W

mg Zn/7

Zinc

Volatiles @ 600 C

me____ACE, INC 13715 RIDER TRAIL NORTH EARTH CITY. MO 63045 PROJECT # 1005-01

CLIENT: McDONNELL DOUGLAS

DATE: 05/11/87

	SITE I.D.	LAB #	SAMP.DATE	PARAMETER	CONC.	UNITS	DATE ANALY.	ANALYST	STANDARD METHOD
	4728	AA00765	04/22/87	SPECIFIC GRAVITY	1.313	at 4 degrees C	04/30/87	W.G.	213E
				FLASHPOINT	(0	DEGREES C	04/30/87	J.S.	1010
	4729	AA00766	04/22/87	SPECIFIC GRAVITY	1.117	at 4 degrees C	04/30/87	₩.6.	213E
		2.6		FLASHPOINT	17	DEGREES C	04/30/87	1.5.	1010
	4730	AA00767	04/22/87	SPECIFIC GRAVITY	1.013	at 4 degrees C	04/30/87	₩.G.	213E
				FLASHPOINT	(0)	DEGREES C	04/30/87	J.S.	1010
	4731	AA00768	04/22/87	SPECIFIC GRAVITY	1.448	at 4 degrees C	04/30/87	W.G.	213E
				FLASHPOINT	9	DEGREES C	04/30/87	J.S.	1010
	4732	AA00769	04/22/87	SPECIFIC GRAVITY	1.093	at 4 degrees C	04/30/87	W.G.	213E
				FLASHPOINT	15	DEGREES C	04/30/87	J.S.	1010
	4733	AA00770	04/22/87	SPECIFIC GRAVITY	1.449	at 4 degrees C	04/30/87	₩.6.	213E
)				FLASHPOINT	36	DEGREES C	04/30/87	J.S.	1010
	4734	AA00771	04/22/87	SPECIFIC GRAVITY	1.310	at 4 degrees C	04/30/87	₩.G.	213E
-	7,50	e		FLASHPOINT	34	DEGREES C	04/30/87	J.S.	1010
	4735	AA00772	04/22/87	SPECIFIC GRAVITY	1.011	at 4 degrees C	04/30/87	₩.G.	213E
				FLASHPOINT	(0	DEGREES C	04/30/87	J.S.	1010
	4736	AA00773	04/22/87	SPECIFIC GRAVITY	.845	at 4 degrees C	04/30/87	₩.G.	213E
				FLASHPOINT	(0	DEGREES C	05/05/87	J.S.	1010
	4737	AA00774	04/22/87	SPECIFIC GRAVITY	.845	at 4 degrees C	04/30/87	W.G.	213E
				FLASHPOINT	(0	DEGREES C	05/05/87	J.S.	1010
	4738	AA00775	04/22/87	SPECIFIC GRAVITY	.964	at 4 degrees C	04/30/87	₩.G.	213E
			. W - P*	FLASHPOINT	32	DEGREES C	05/05/87	J.S.	1010
	4739	AA00776	04/22/87	SPECIFIC GRAVITY	.810	at 4 degrees C		₩.G.	213E
				FLASHFOINT	⟨0	DEGREES C	05/05/87	J.S.	1010
	4744	AA00777	04/22/87	SPECIFIC GRAVITY	.897	at 4 degrees C		₩.G.	213E
				FLASHFOINT	54	DEGREES C	05/05/87	J.S.	1010

Sec	tion E Composi	tion		
Comp				of the waste and the concentration. List ght percentages.
Haj	or Components		(wt.\$)	Extraction Procedure Concentration (ppm)
١.	Mixed	Solvents	99%	
2.	Water		1%	
3.				κ.
١.				
5.				
i .				1
7.				
			1	, *
iec	tion F - Physi	cal Data		
2.		te (Circle One): nd Odor:		
3.	Solubility in	ı water	7	, % by weight of volatiles at 600°C
1.	Specific gray	ity (H20-1)		. Boiling Point (°C)
5.	Vapor density			. pH
5.	1 by weight o	of volatiles at	100°C	
Şeç	tion G - Fire	and Explosion D	ete	
١.	Flashpoint (d D-93-77 or se	ircle one, if a	pplicable) - Per tester method A	nsky - Hartens closed cup tester ASIM std. SIM std. D-3278-73C < 140 F
2.	Extinguish Me	edia a./X/	dry chemical.	b. X CO2. c. X alcohol foam.
		d. (X)	water fog,	ex/ water spray,
		1/	dener, specify	
Sec	tion H - Healt	th Hazard Data		
١.				
2.	Emergency and	first Aid proc	edure _Flus!	h skin and eyes with water -
	consul	t_physician	1	

from Missouri wastestream registration Flammable Solvents (D001, F003, F005)

Sec	tion I						
Rea	ctivity Data:						
_					Condi	tions to avoid	
١.	Stability	Unstable Stable	X		Exc	essive heat	
2.	Incompatibili	ty (mater	rials to avoi	(b)	Spa	rks or open flame	
3.	Hazardous Polymerizatio	n H	y Occur y Not Occur	_	x	Conditions to avoid	
Sec	tion J			<u> </u>			
Spl	Il or Leak Pro	cedures:					
Ste	ps to be taken	In case	material is	rele	eased		
	Cont	ain ar	nd recove	r			
Sec	tion K						
Spe	cial Protection	n Inform	ation:			£ 2	i
1.	Respiratory F	rotection	n (specific	type)	Organic solvent vapor	
2.	Protective gl	oves				Rubber or PVC	
3.	Eye Protection	on				Face shield	
4.	Special Cloth	ing (spe	cify type)				
5.	Precautions (to be tak	en in handli	ng ar	nd stori	ng	
	Handle a	s a fl	ammab1e	liq	ju i d		
6.	Other Precaul	tons					
7.	24-hour emerg	ency pho	ne number	(3	114) 2	232-0232	
Sec	tion L						
Car	tainerization						
			ontainers 1	she l	s and n1	acards required for transportation.	
3pe							
	usea 1/F	urums	- Flamm	ab l	e Liq	uid, Flammable	

Environmental Analysis, Inc.

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MCDONNELL-DOUGLAS

PAGE NO :

REPORT NO :

22559

DATE: 09/17/86

RESULTS OF ANALYSIS

		more storm corps where whose arous about error direct copies specie specie specie about magas where beaute states		
LOG	SAMPLE	TEST	RESULTS OF	UNITS OF
NUMBER	DESCRIPTION	NAME	ANALYSIS	EXPRESSION
NUMBER	DESCRIPTION			
	100			
.*				
	4802 043 FLAM. SOLV	Silver	<0.050	mg Ag/l
712033	4802 043 FLAM: 30LV	Arsenic	0.105	mg As/l
		Residue @ 600 C	0.27	% W/W
		Barium	13.3	mg Ba/l
		BTU	12625	BTU/1b
		Cadmium	0.190	mg Cd/l
		Cyanide	0.34	ug CN/g
		Reactive Cyanide		ug CN/g
	•	Chromium	46.0	mg Cr/l
		EP TOXICITY	261.24	Meth.No
		EP Silver	<0.050	mg Ag/l
		EP Arsenic	0.047	mg As/l
			1.23	mg Ba/l
etc.		EP Barium	<0.005	mg Cd/l
	36	EP Cadmium	3.01	mg Cr/l
		EP Chromium	<0.002	mg Hg/l
		EF Mercury	0.020	mg Pb/l
		EP Lead	<0.005	mg Se/l
		EP Selenium		deg. C
		Flash Point (PM)		mg Hg/l
		Mercury	< 0. 020	mg Pb/1
		Lead	24.7	pH Unit
*		pH Value	6.70	
		Phenols	593	ug/g
		Sulfides (dist.)		u g S/g
		Sulfides (React.		ug S/g
		Selenium	0.080	mg Se/l
		Specific Gravity		g/ml
		Total Metals Fre		*/ /···
		Total Solids	89.02	% w/w
		Volatiles @ 100		% W/W
		Volatiles @ 600	C 99.73	% w/w
		Zinc	1.64	mg Zn/l



caTRACE, INC .15 RIDER TRAIL NORTH -EARTH CITY, MO 63045

PROJECT: 1005-01

CLIENT: McDONNELL DOUGLAS

DATE: 05/01/87

SITE I.D.		LAB #	SAMPLE DATE	PARAMETER	CONC.	UNITS	DATE ANALY.	ANALYST	STANE METHC
4765	(4996)	AA01370	05/21/87	SPECIFIC GRAVITY	0.811		05/26/87	P.G.	213
			05/21/87	FLASH POINT	(0	degrees C	06/01/87	J.C.	101
4766	(4996)	AA01371	05/21/87	SPECIFIC GRAVITY	0.831	€ 4 degrees C	05/26/87	P.G.	213
			05/21/87	FLASH POINT	(0)	degrees C	06/01/87	J.C.	101
4767	(4996)	AA01372	05/21/87	SPECIFIC GRAVITY	0.884	@ 4 degrees C	05/26/97	P.G.	213
*			05/21/87	FLASH POINT	(0)	degrees C	06/01/87	J.C.	101
4763	(4994)	AA01373	05/21/87	SPECIFIC GRAVITY	1.002	@ 4 degrees C	05/26/87	P.G.	213
				рΗ	7.64	pH units	05/27/87	D.K.	42
				TITANIUM	<.050	mg/l	06/01/87	G.L.	30
				CHROMIUM .	238	ag/l	06/01/87	G.L.	30
				SODIUM HYDROXIDE	0.22	% by WGT NaOH	06/01/87	G.L.	30
4769	(4996)	AA01374	05/21/97	SPECIFIC GRAVITY	1.004	9 4 degrees C	05/25/87	۲.6.	213
				РΗ	9.91	pH units	05/27/87	D.K.	42
				ALUMINUM	.700	mg/l	06/01/87	6.L.	30
(U)				CHROMIUM	.210	mg/l	05/01/87	G.L.	30
4770	(4996)	AA01375	05/21/87	SPECIFIC SRAVITY	1.1583	@ 4 degrees C	05/26/87	P.S.	213
				рН	4.50	pH units	05/27/87	D.K.	42
				ALUMINUM	1.05	mg/l	06/01/87	G.L.	30
			1	CHROMIUM	.986	mg/l	06/01/87	S.L.	30
				SULFURIC ACID	13.81	% WST H2S04	06/01/87	S.L.	30
4771	(4995)	AA01376	05/21/87	SPECIFIC GRAVITY	1.033	€ 4 degrees C	05/26/87	P.G.	213
7//1	(4//0/	MM01370	V3/21/0/	На	0.88	pH units	05/27/87	D.K.	42
	6			PHENOL		APPLICABLE TO METHOD	00/2//0/	24/14	
				ORGANIC CHLORIDES	.0072	% WST C1(-)	05/27/87	B.T.	40
4772	(4996)	AA01377	05/21/87	SPECIFIC GRAVITY	1.021	@ 4 degrees C	05/26/87	P.G.	2131
AC 1 (#E)	= .	220 A T. C. T. C. C.		рН	1.48	pH units	05/27/87	D.K.	42
				CHROMIUM	2.54	mq/l	06/01/87	6.L.	30!
				SULFIDES		APPLICABLE TO METHOD			
				INORGANIC NITRATES	.0008	% WGT NO3(-)	05/27/87	B.T.	EPA 3
				PHOSPHATES	.028	% WGT PO4(-3)	06/01/87	G.L.	30!
				SULFATES	.095	% WGT 504(-2)-	05/27/87	E.T.	EPA 3

Care XI. Byington

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102

314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2000-6406. Expires 7-31-26 1. Generator's US EPA ID No. Manifest UNIFORM HAZARDOUS 2. Page _ Information in the shaded areas Document No. M | O | D | O | O | O | 8 | 1 | 8 | 9 | 5 | 5 | O | O | O | is required by State law. **WASTE MANIFEST** 3. Generator's Name and Mailing Address MCDONNELL DOUGLAS CORPORATION - ST. LOUIS tor's ID - oth P.O. BOX 516, ST. LOUIS, MISSOURI 4. Generator's Phone (314) 232-3319 MO. Transporter's ID 5. Transporter 1 Company Name 6. US EPA ID Number 01010101811 MCDONNELL DOUGLAS CORPORATION 7. Transporter 2 Company Name 8. US EPA ID Number NONE 9. Designated Facility Name and Site Address 10. US EPA ID Number MCDONNELL DOUGLAS CORPORATION 140 MCDONNELL BOULEVARD ST. LOUIS COUNTY, MISSOURI M, O, D, O, O, O, 8, 1, 8, 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 12. Containers 13. Total Unit Quantity Wt/Vol WASTE FLAMMABLE LIQUID. N.O.S. FLAMMABLE LIQUID UN1993 0 0.0.1 G ENER b. HAZARDOUS WASTE, SOLID, N.O.S. 0 0,0,0,4 NA9189 ORM-E A 0 HAZARDOUS WASTE, LIQUID, N.O.S. R 5 NA9189 ORM-E al Descriptions for Materials Listed Above K. Handling God this Colven 15. Special Handling Instructions and Additional Information "IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY, RETURN TO GENERATOR." 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Printed/Typed Name Signature Month Day Year 9 COLLOVG 17. Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day ANSPORTER 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day Year 19. Discrepancy Indication Space F C 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. L Date T Day Printed/Typed Name Month Year Ly sales Wen EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed : if use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2000-0404. Expires 7-31-86 1. Generator's US EPA ID No. Manifest UNIFORM HAZARDOUS 2. Page Information in the shaded areas Bocument No M O DO 0 0 3 is required by State law. WASTE MANIFEST 3. Generator's Name and Mailing Address MCDONNELL DOUGLAS CORPORATION - ST. LOUIS P.O. BOX 516, ST. LOUIS, MISSOURI 4. Generator's Phone (314) 232-3319 5. Transporter 1 Company Name 6 US FPA ID Number **PART** 8 9 M.O.D.O.O.O 3.1. 6 3 MCDONNELL DOUGLAS CORPORATION 7. Transporter 2 Company Name 8 US EPA ID Number NONE 9. Designated Facility Name and Site Address 10. US EPA ID Number MCDONNELL DOUGLAS CORPORATION 140 MCDONNELL BOULEVARD M₁O₁D₁O₁O₁O₁O₁8₁1₁8₁9₁6₁3 ST. LOUIS COUNTY, MISSOURI 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 12. Containers 13. Total Cuantity Wt/Voi HAZARDOUS WASTE, SOLID, N.O.S. NA9189 CM ORM-E 0.0.0.0. G ENERATO WASTE ORM-A, N.O.S. G 0 0 NA1693 2 DM ORM-A 0,0,1,1,0 R d. 15. Special Handling Instructions and Additional Information "IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY, RETURN TO GENERATOR." 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the m or disposal currently available to me which minimizes the present and future threat to human health and the environment. 뽀 Date TRANSPORT 17. Transporter 1 Acknowle Day Month BY Printed/Typed Name Signature THIS COPY MUST BE RETAINED THE TSDF. Transporter 2 Acknowledgement of Receipt of Materials Date 18. Signature Month Day Printed/Typed Name ER 19. Discrepancy Indication Space F AC 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. L Date T Day Printed/Typed Name Signature EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

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EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program

P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241 **HAZARDOUS WASTE MANIFEST**

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300
DEPT. OF NATURAL RESOURCES 314-634-2436

GENERATOR FINAL COPY — PART 2

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TSDF.

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FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102

314-751-3241

HAZARDOUS WASTE MANIFEST

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MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program

P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE
U.S. COAST GUARD
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CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCES
314-634-2436

HAZARDOUS WASTE MANIFEST

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INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED

SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCES
314-634-2436

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on aiile (12-pitch) typewriter.) Form Approved. OMB No. 2000-0404. Expires 7-31-86 1. Generator's US EPA ID No. UNIFORM HAZARDOUS 2. Page _= Information in the shaded areas Document No. 1,5,0,0,0,0,0,1 WASTE MANIFEST is required by State law 3. Generator's Name and Mailing Address A. Missouri, Manifest Document Number 8 MCDONNELL DOUGLAS CORPORATION - ST. LOUIS 1,2,4, P.O. BOX 516, ST. DOUIS, MISSOURI 63166 B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 5. Transporter 1 Company Name 6. US EPA ID Number C. MO. Transporter's ID H-1030 M, O, D, O, O, O, 8, 1, 8, 9, 6, MCDONNELL DOUGLAS CORPORATION D. Transporter's Phone 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID MCDONNELL DOUGLAS CORPORATION H. Facility's Phone 140 MCDONNELL BOULEVARD ST. LOUIS COUNTY, MISSOURI MID 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) MIDIDIDIDIDI 81 11 81 91 6 (314) 232-0960 12 Containers 13. Total Unit I. Waste No. Quantity Wt/Vol MO. RQ WASTE FLAMMABLE LIQUID, N.O.S. 0 Othe 005 FLAMMABLE LIQUID UN1993 (F005, F003, D001) G E b MO N ER Other A 0 R Other MO. J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above a RO = 100 LBS. 15. Special Handling Instructions and Additional Information "IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY, RETURN TO GENERATOR." 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage. or disposal currently available to me which minimizes the present and future threat to human health and the environment. Day Printed/Typed Name Signature 0,1130 17. Transporter 1 Acknowledgement of Receipt of Materials Date Day Printed/Typed Name Month Stanature 140 18. Transporter 2 Acknowledgement of Receipt of Materials Date Day Printed/Typed Name Month 19. Discrepancy Indication Space A 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date TY Day Month Printed/Typed Name Signature EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

ENERATOR FINAL COPY — PART 2

COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

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e print or type (Form designed : a use on elite (12-p	itch) typewriter.) 1. Generator's US	S EPA ID No.	Manifest	2 Page			2000-0404. Expires 7-31-86
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EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102

P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241 HAZARDOUS WASTE MANIFEST EMERGENCY RESPONSE
U.S. COAST GUARD
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1-800-424-9300
DEPT OF NATURAL RESOURCES
314-634-2436

Form Approved. OMB No. 2000-0404. Expires 7-31-8

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EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102

314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed tor use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2000-0404. Expires 7-31-86 UNIFORM HAZARDOUS 1. Generator's US EPA ID No. 2. Page Information in the shaded areas Document No. WASTE MANIFEST is required by State law MIOIDIOIOIOI81113191016 01 0 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number MCDONNELL DOUGLAS CORPORATION - ST. LOUIS 12 14 8 1 P.O. BOX 516, ST. LOUIS, MISSOURI B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 5. Transporter 1 Company Name 6. US EPA ID Number C. MO. Transporter's ID H-1039 8 1 8 MCDONNELL DOUGLAS CORPORATION M O D O O O D. Transporter's Phone 314) 232-9327 7. Transporter 2 Company Name 8. US EPA ID Number F. MO. Transporter's ID NONE 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID MCDONNELL DOUGLAS CORPORATION 140 MCDONNELL BOULEVARD H. Facility's Phone M, O, D, O, O, O, 8, 1, 8, 9, 6, 3 (314) 232-0960 ST. LOUIS COUNTY, MISSOURI 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 12. Containers Total Unit I. Waste No Quantity 0 0 WASTE CORROSIVE LIQUID, N.O.S. Other D002 G CORROSIVE MATERIAL N 0 E WASTE ORM-A, N.O.S. Other R F00 ORM-A NA1693 A MO. 0 0 HAZARDOUS WASTE, LIQUID, N.O.S. Other MO B Mcker Other J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above Nitric-Chromic-Fluorides Chlorinated Solvent Waste Oil 15. Special Handling Instructions and Additional Information "IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY, RETURN TO GENERATOR." 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. Unless | am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA. I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Signature Month Day NOL 1.8 17. Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day ANSPORTER 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name Month Day Signature 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Signature Day Month

RETURN FROM IIS AFTER THE GENERATOR ВУ RETAINED BE MUST COPY THIS

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

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NSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

B Mckee

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL' RESOURCES
314-634-2436

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed 1.3); use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2000-0404. Expires 7-31-86 1. Generator's US EPA ID No. **UNIFORM HAZARDOUS** 2. Page _____ - Information in the shaded areas M, O, D, O, O, O, 8, 1, 8, 9, 7, 1 WASTE MANIFEST is required by State law. 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number MCDONNELL DOUGLAS CORPORATION - ST. LOUIS P.O. BOX 516, ST. LOUIS, MISSOURI 63166 B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 5. Transporter 1 Company Name C MO Transporter's ID H-1039 M O D O O O MCDONNELL DOUGLAS CORPORATION D. Transporter's Phone (314) 232-9327 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID NONE F. Transporter's Phone 9. Designated Facility Name and Site Address G. State Facility's ID 10. US EPA ID Number MCDONNELL DOUGLAS CORPORATION 140 MCDONNELL BOULEVARD H. Facility's Phone ST. LOUIS COUNTY, MISSOURI (314) 232-0960 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 13_ 14. Unit Total Quantity Wt/Vo RQ WASTE FLAMMABLE LIQUID, N.O.S. Other UN1993 (F005, F803, D001) WASTE CORROSIVE LIQUID, N.O.S. G CORROSIVE MATERIAL UN1760 WASTE SULFURIC ACID, SPENT CORROSIVE MATERIAL UN1832 J. Additional Descriptions for Materials Listed Ab RO = 100 LBS. Nitria-Hedrofinorio Acid 15. Special Handling instructions and Additional information "IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY, RETURN TO GENERATOR." 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Month Day 0.3 0.3 17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name 0,310,31 VORM 18. Transporter 2 Acknowledge Month Day Printed/Typed Name Year 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN
THE TSDE

EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

THIS DOCUMENT MUST BE USED

FOR ALL MISSOURI-DESTINED

SEPARATE SHEET.

SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality

Waste Management Program

P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC -800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2000-0404. Expires 7-31-86 1. Generator's US EPA ID No. Manifest UNIFORM HAZARDOUS 2. Page ___ Information in the shaded areas Document No. M O D 9 8 0 9 6 8 4 WASTE MANIFEST is required by State law 3. Generator's Name and Mailing Address MCDONNELL DOUGLAS CORPORATION - ST. LOUIS P.O. BOX 516, ST. LOUIS, MISSOURI 63166 4. Generator's Phone (374) 232-3319 MO. Transporter's ID N-1039 6. US EPA ID Number 5. Transporter 1 Company Name M101D1010101811 CDONNELL DOUGLAS CORPORATION 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID NONE 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID MCDONNELL DOUGLAS CORPORATION 140 MCDONNELL BOULEVARD 0 0 0 3 1 8 ST. LOUIS COUNTY, MISSOURI 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number, Total Unit Quantity Wt/Vol a. RO WASTE FLAMMABLE LIQUID, N.O.S. 0,0,90 M (F005, F003, D001) FLAMMABLE LIQUID UN1993 G F b. N Ε R A C. 0 R d. J. Additional Descriptions for Materials Listed Above d. 15. Special Handling Instructions and Additional Information "IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY, RETURN TO GENERATOR." 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Printed/Typed Name Signature Date 17. Transporter 1 Acknowledgement of Receipt of Materials Day Month Printed/Typed Name Signature Year Date 18. Transporter 2 Acknowledgement of Receipt of Materials Day Signature Month Year Printed/Typed Name 19. Discrepancy Indication Space Α C 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19 Date Day Month Printed/Typed Name Signature Lit.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

> GENERATOR FINAL COPY — PART 2 THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TSDF.

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THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300

DEPT. OF NATURAL RESOURCES 314-634-2436

GENERATOR FINAL COPY — PART 2

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TSDF.

				romminpprovous on	10. 2	2000-0404. Expires 7-31-8
UNIFORM HAZARDOUS 1. Generator's U		lanifest	2. Page	Informa	ation in	the shaded areas
WASTE MANIFEST		ument No.	of _	is requi	red by	State law.
3. Generator's Name and Mailing Address		AND THE PARTY OF T	COLUMN STREET, SALE	ouri Manifest Docum	nent Nu	mber
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4. Generator's Phone (314) 232-3319	~		4			
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7. Transporter 2 Company Name	8. US EPA ID Number	the second second second	-	Transporter's ID		
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NSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED

SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program

P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed : use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2000-0404. Expires 7-31-86 UNIFORM HAZARDOUS 1. Generator's US EPA ID No. Manifest 2. Page __ Information in the shaded areas Document No. MOD98096 is required by State law. WASTE MANIFEST of _ 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number MCDONNELL DOUGLAS CORPORATION - ST. LOUIS 1.01 0 14 12 11 P.O. BOX 516, ST. LOUIS, MISSOURI B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 6. US EPA ID Number C. MO. Transporter's ID 711030 5. Transporter 1 Company Name 9 M.O.D.O.O.O .3,1,3, MCDONNELL DOUGLAS CORPORATION D. Transporter's Phone (314)232-9327 7. Transporter 2 Company Name 8 US EPA ID Number E. MO. Transporter's ID NONE F Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID MCDONNELL DOUGLAS CORPORATION 140 MCDONNELL BOULDVARD H. Facility's Phone M.O.D.O.O.O.8, 1, 8, 9, 6, LOUIS COUNTY, MISSOURI 232-0960 12 Containers 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 13 14 Total Unit I. Waste No. Quantity Wt/Vol MO M.O.S. WASTE CORROSIVE LIQUID, Othe G D002 (D002) G Ε N 0 E RO WASTE CRIFA, M.O.S. Other R F001 A 0 0 RQ WASTE FLAMMABLE LIQUID, N.O.S. R Other (F005, F003, D001) FLAMMABLE LIQUID mon MO. d. 0 HAZARDOUS WASTE, LIQUID, N.O.S. Othor ORM-E NA9189 J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above C. 15. Special Handling Instructions and Additional Information RETURN TO GEMERATOR. TSD FACILITY, TO DELIVER TO DESIGNATED "IF UNABLE 16. GENERATOR'S CERTIFICATION. I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Printed/Typed Name Signature Day 17. Transporter 1 Acknowledgement of Receipt of Materials Date Day Printed/Typed Name Month Signature Year 10 TAYY 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day Year 19. Discrepancy Indication Space F AC 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. L Date Printed/Typed Name Signature Month Day

THIS (

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program

P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

U.S. COAST GUARD 1-800-424-8802 1-800-424-9302 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

GENERATOR FINAL COPY — PART 2

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TSDF.

	MAZAKDOUS WASTE MANIFI	E5				017 007 2700
lea	se print or type (Form designed : : use on elite (12-pitch) typewriter.)					000-0404. Expires 7-31-86
A	UNIFORM HAZARDOUS 1. Generator's US EPA ID No. Manifest Document N	No. , 2	Page	7		the shaded areas
I	WASTE MANIFEST - [3,0,0,9,3,5,9,6,1,5]	4	of _	is requ	ired by	State law.
	3. Generator's Name and Mailing Address	A	. Misso	ouri Manifest Docu	ment Nu	mber
	MCDONNELL DOUGLAS-CORPORATION - ST. LOUIS	1	01	4101011	8	0 10 12 14
1	P.O. BOX 516, ST. LOUIS, MISSOURI 63166	В	. State	Generator's ID - o	other	
	4. Generator's Phone (314) 232–3319		50			
l	5. Transporter 1 Company Name 6. US EPA ID Number	C	. мо.	Transporter's ID	ar projects	000
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	9. Designated Facility Name and Site Address 10. US EPA ID Number	-		porter's Phone Facility's ID	12 13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	MCDONNELL DOUGLAS CORPORATION	G	. State	Pacility's ID		
	140 MCDONNELL BOULEVARD				M.S. P.	
		5 3	I. Facili	ty's Phone		
	ST. LOUIS COUNTY, MISSOURI MODOO81396	0 7		(314)	232-	0960
	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 12. Co	ontainers	3	13. Total	14.	I. Waste No.
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	J. Additional Descriptions for Materials Listed Above	K	. Hand	ling Codes for Wast	tes Listed	Above
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	c.				-5 40	
	d.	-12				
		S. 441	16.0		W	225 Co. 2017 F. F. Co.
	15. Special Handling Instructions and Additional Information			*		
	"IF UNABLE TO DELIVER TO DESIGNATED TSD FAGILLTY, RET	URN	TO	GINERATOR		
	16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described at	above by	proper	shipping name and	are class:	fied, packed, marked, and
	labeled, and are in all respects in proper condition for transport by highway according to applicable international and natio					**************************************
	Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimiz have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economic					
	or disposal currently available to me which minimizes the present and future threat to human health and the environment.		cticabi	c and mare solection	2 (110 /1101)	, , , , , , , , , , , , , , , , , , ,
	Printed/Typed Name Signature	_			140	Month Day Year
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	17. Transporter 1 Acknowledgement of Receipt of Materials	-				Date
	Printed/Typed Name Signature	N		r		Month Day Year
	11/12 Fort	-	10			10.14/18.
	18. Transporter 2 Acknowledgement of Receipt of Materials	102			-	Date
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2	Signature Signature					l l l
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	19. Discrepancy Indication Space					
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	20 Facility Owners Operator Cartification of	m 10				
	 Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Iten 	m 19.				
	Printed Turned Nome					Date Month Day Year
1	Printed/Typed Name Signature					Month Day Year

Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241 HAZADDONG WASTE MARNIEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
PT. OF NATURAL RESOURCES
314-634-2436

GENERATOR FINAL COPY - PART 2

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TSDF.

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED

EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

SH	HAZARDOU:	3 WASAE	MAMILES	1			DE11.0	314-634-2436
Plea	ase print or type (Form designed for use on elite (12-pitch) typewriter.)				Form Approve	d. OMB No	o. 2000-0404. I	Expires 7-31-86
A	UNIFORM HAZARDOUS 1. Generator's US EPA ID		Manifest Document No.	2. Page _	- In	formation	in the shad	ed areas
-	WASTE MANIFEST I I I D D O O O	8,1,8,9,7,3	$-10_{1}0_{1}0_{1}4_{1}2$	of _	is	required l	by State law	
	3. Generator's Name and Mailing Address			A. Misson	uri Manifest [Document	Number	The Charles of
	MCDONNELL DOUGLAS CORPORATION - ST. L	OUIS		0,1	1 2 , 5	1	0 0	14 12
	P.O. BOX 516, ST. LOUIS, MISSOURI 63	166		B. State	Generator's I	D - other	Section services	
	4. Generator's Phone (314) 232-3319							
		S EPA ID Number		C. MO. T	ransporter's	DH-10	39	
	MCDONNELL DOUGLAS CORPORATION ML	OLDI OLOI OLO	2, 1, 2, 0, 6, 2		orter's Phon) 232-	9327
		S EPA ID Number	1 3 9 7 3 -		ransporter's I	1000	1 600 60	J 2 50 6
	4			-	orter's Phone	2,314,44		
İ	9. Designated Facility Name and Site Address 10. U	JS EPA ID Number		1 2 00000	Facility's ID			
	MCDONNELL DOUGLAS CORPORATION							
	140 MCDONNELL BOULEVARD			H Facilit	y's Phone			
-	The state of the s	0, D, 0, 0, 0, 8	3 1 8 9 6 9	ri. radiin	TE GETTINGS, ME			
	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Nur	The second secon	12. Containe			232-0		
	11. 05 DOT Description (including Proper Shipping Name, Hazard Class, and ID Num	mber)	12. Containe	ers	13. Total	14 Un	it I. W	/aste No.
	a.				Quantity	Wt/V	CHANGE SECTION	44-47-1049-5-4-22
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ER	RQ WASTE FLAMMABLE LIQUID, N.O.S.		1				Other	413
A	FLANMABLE LIQUID UN1993 (F005, F	7003, D001	0,0,1	DIM	0101015	15		
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OR	(NOT D.O.T. REGULATED)				_	. 1	Other	7
1	(AUL D. U. I. REGULATED)		0,0,1	TIP	0101317	151	G N)	A
	d.	1					MO.	MALE SER
	WASTE CORROSIVE SOLID, N.O.S.						Other	7 2
	CORROSIVE MATERIAL UN 1759 D002		0.0.1	DIM	0,01015	5,5	7 N/	
	J. Additional Descriptions for Materials Listed Above			K. Handli	ng Codes for	Wastes Lis	ted Above	
	a Sodium Hydroxide Solution			- Isla	1 1612	415		Eq. 42
	b. Flammable Liquid RQ = 100 lbs.		Constitution of the second	5240	120 24	-131	Transfer.	Bri ZNY
	Cutting Oil			- 1	14.4	200	10-1	Birry
	d Alkeline Sludge		6124 Jan 1961	. T				FERE
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	TE UNABLE TO DELIVER TO DESIGNATED I	CON KACKEL	e was a constitution	C. C.		- 4		
	16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consigning labeled, and are in all respects in proper condition for transport by highway according to the content of the conten	ding to applicable inter	ately described above t national and national g	oy proper s overnmen	hipping name t regulations i	and are cla and applica	ssified, packei ible state regu	d, marked, and lations.
1	Unless I am a small quantity generator who has been exempted by statute or regulat							
	have a program in place to reduce the volume and toxicity of waste generated to the or disposal currently available to me which minimizes the present and future threa	degree I have determine it to human health and t	ed to be economically p he environment.	racticable	and I have sel	ected the m	ethod of treat	ment, storage,
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Т	17. Transporter 1 Acknowledgement of Receipt of Materials				3	NAME OF TAXABLE PARTY.		Date
R	Printed/Typed Name	Signature					Month	Day Year
NS	JOHN GRANSON	1. 3.	i				10,51	1.2 87
PO	18. Transporter 2 Acknowledgement of Receipt of Materials	7.70	A ray				-	Date
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C		. O						
Ĺ	20. Facility Owner or Operator: Certification of receipt of hazardous materials covered	d by this manifest excep	ot as noted in Item 19.					
I T								Date
Y	Printed/Typed Name	Signature	0 1 -				Month	Day Year
	70 - 1						13 51	/ 13

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102

314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

Plea	se print or type (Form designed 'ar use on elite (12-patch)						Form Approved. Of	ИВ No. 2	2000-0404. Expires 7-31-86
A	UNIFORM HAZARDOUS	1. Generator's US E	EPA ID No.	Doc	Manifest	2. Page	Inform	ation in	the shaded areas
45	WASTE MANIFEST	0, 0, C, O, M	.,0 ,8 ,1 ,8 ,9 ,1	1,8 10,0	1, 0, 1, 1	of _	is requ	ired by	State law.
	3. Generator's Name and Mailing Address				-		ouri Manifest Docum	nent Nu	mber
	MCDONNELL DOUGLAS CORPOR	TP - TOTTA	LOHES			0	1 2 5	3	0 ,0 ,1 ,1
	P.O. BOX 516, ST. LOUIS,						Generator's ID - o	ASSCREEN	
	4. Generator's Phone (314) 232-3319	TISSUSIA	03100			e de la			
	5. Transporter 1 Company Name		6. US EPA ID Number		[9]	C. MO.	Transporter's ID	H-10	39
	MCDONNELL DOUGLAS CORPOR	HOITA	MICIDIOLO	1 8 1 8	31 91 6 3	D. Trans	sporter's Phone	(314) 232-9327
	7. Transporter 2 Company Name		8. US EPA ID Number			E. MO.	Transporter's ID	7.26.7	
	MONTE			1 1 1	1 1 1	F. Trans	sporter's Phone		
	9. Designated Facility Name and Site Address		10. US EPA ID Numbe	er	erry der des parties de la computence de desse	G. State	Facility's ID		
	MCDONNELL DOUGLAS CORPOR	ATION							
	140 MCDONNELL BOULEVARD					H. Facil	ity's Phone	A TOTAL	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	ST. LOUIS COUNTY, MISSOU	RI	M, O, D, O, O, O	0,8,1,8	3, 9, 6, 3		(314) 232	006	•
	11. US DOT Description (Including Proper Shipping Nam		A SAN COMMENT AND ADDRESS OF THE PARTY OF TH		12. Contain		13.	14.	Life Takes Separate Sec.
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	b.						the sales and the sales are	1	MO.
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	d.				3 10 12	2 22	0001-	-	MO./A
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	J. Additional Descriptions for Materials Listed Above			190 apr 190 apr		K Hone	lling Codes for Wast	na Liator	About
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	16. GENERATOR'S CERTIFICATION: I hereby deciare that								
	. labeled, and are in all respects in proper condition for								
	Unless I am a small quantity generator who has been ex have a program in place to reduce the volume and toxic	ity of waste generated	to the degree I have deter	mined to be e	conomically				
	or disposal currently available to me which minimizes	the present and future		and the enviro	onment.				
	Printed/Typed Name		Signature			1 1	-		Month Day Year
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0	18. Transporter 2 Acknowledgement of Receipt of Materia	ils	71/6/	1/10)/	1	-	Date
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Ĺ	20. Facility Owner or Operator: Certification of receipt of	hazardous materials o	covered by this manifest e	except as note	ed in Item 19.				
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	The call = Mining			10	1 - 0 /	,			0,5 42 67

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TSDF.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102

314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

Ple	ase print or type (Form designed : use on elite (12-pitch)		y .			Form Approved. ON	1B No. 2	000-0404. 1	Expires 7-	-31-86
A	UNIFORM HAZARDOUS	1. Generator's US E	EPA ID No.	Manifest	2. Page	Informa	ation in	the shad	ed areas	3
-	WASTE MANIFEST	M 0, D, 0, (0, 0, 3, 1, 8, 9, 0, 60	2,0,3	of _	is requi	red by	State law		
	3. Generator's Name and Mailing Address				A. Misso	uri Manifest Docum	ent Nu	mber		
	MCDONNELL DOUGLAS CORPORA	TION - ST	. LOUIS	*	0 . 1	1,2,4,8		0, 2	2,0,	3
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П	4. Generator's Phone (314) 232-3319	11100001111	0020		1					
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			1						it was seed to	
	9. Designated Facility Name and Site Address		10. US EPA ID Number			Facility's ID	AN		C. L. S. L. S.	
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	11. US DOT Description (Including Proper Shipping Name)	e, Hazard Class, and I	ID Number)	12. Containe	rs	13. Total	14. Unit	1. W	aste No.	
		, m,				Quantity	Wt/Vol.			
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T	C.		(CONTAINS					MO.	2	6
OR	WASTE CORROSIVE LIQUID, I	OISON, N.	O.S. POTASSIUM					Other	4-11	
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	J. Additional Descriptions for Materials Listed Above			CONTRACTOR OF STREET	STREET, STREET	ing Codes for Waste	s Listed	Above 1		
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	15. Special Handling Instructions and Additional Informat	on		-375 21	State I and		604 ES20000	NACON PRODUC		
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	16. GENERATOR'S CERTIFICATION: I hereby declare that labeled, and are in all respects in proper condition for									, and
	Unless I am a small quantity generator who has been ex	empted by statute or r	egulation from the duty to make a wast	e minimization	certificat	ion under Section 30	02(b) of	RCRA, I als	so certify t	
	have a program in place to reduce the volume and toxic				racticable	e and I have selected	the meth	nod of treat	ment, stor	rage,
	Printed/Typed Name		Signature					Month	Day	Year
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	18. Transporter 2 Acknowledgement of Receipt of Materia		le. Min	11				110	717	11/
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н	U.S.				-					
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SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

U.S. COAST GUARD 1-809-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2000-0404. Expires 7-31-86 UNIFORM HAZARDOUS 1. Generator's US EPA ID No Manifest Information in the shaded areas 2 Page Document No. 4,0,0,0,0,0,1,3,9 6 10 is required by State law WASTE MANIFEST 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number McDonnell Douglas Corporation - St. Louis 0 11 12 14 1 012101 St. Louis, Mo. 63166 PO Box 516 B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 5. Transporter 1 Company Name 6. US EPA ID Number C. MO. Transporter's ID H-1039 M, O, D, O, O, O, 3, D. Transporter's Phone (314) 232-9327 McDonnell Douglas Corporation 8. US EPA ID Number 7. Transporter 2 Company Name E. MO. Transporter's ID F. Transporter's Phone none 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID McDonnell Douglas Corporation H. Facility's Phone 140 McDonnell Boulevard (314) 232-0960 MO, D, O, O, O, 8, 1, 8, 9, 6, 3 St. Louis County, Mo. 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Total Unit 1. Waste No. Quantity Wt/Vol MO Waste corrosive liquid, N.O.S. 9 0 0 Corrosive Material UN1760 Other 0, 010 G b. MO N Waste Sulfuric Acid, Spent E Corròsive Material Other R G DM Ditil D002 A MO C 0 0 Waste Sodium Hydroxide Solution Other D002 Corrosive Material UN1824 D002 0 DM d MO 0 9 Waste Corrosive Solid, N.O.S. Othe 0 D002 Corrosive Material UN1759 1 Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above Methylene Chloride - Phenol - Formic Acid Sulfuric Acid Sodium Hydroxide Acid Sludge 15. Special Handling Instructions and Additional Information "If unable to deliver to designated TSD facility, return to generator." 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Signature Month Day Year 0.6 Date 17. Transporter 1 Acknowledgement of Receipt of Materials Day Printed/Typed Name Signature AZSPORTER 18. Transporter 2 Acknowledgement of Receipt of Materials Date Day Signature Month Year Printed/Typed Name 19. Discrepancy Indication Space F A

Signature

PART

-

THIS (

Date

Day

Year

Mionth

EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

Printed/Typed Name

L

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Please print or type (Form designed : r use on elite (12-pitch) typewriter.)

McDonnell Douglas Corporation

McDonnell Douglas Corporation

140 McDonnell Boulevard

St. Louis County, Mo.

McDonnell Douglas Corporation - St. Louis

St. Louis, Mo. 63166

UNIFORM HAZARDOUS

WASTE MANIFEST

4. Generator's Phone (314) 232-3319

3. Generator's Name and Mailing Address

PO Box 516

5. Transporter 1 Company Name

7. Transporter 2 Company Name

9. Designated Facility Name and Site Address

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

HAZARDOUS WASTE MANIFEST

6 US EPA ID Number

MOD000

8 US FPA ID Number

10. US EPA ID Number

M, O, D, O, O, O, 8, 1, 8, 9, 6, 3

M, O, D, O, O, O, S, 1, S, 9, 7, 1

1. Generator's US EPA ID No.

EMERGENCY RESPONSE
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1-800-424-8802
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DEPT. OF NATURAL RESOURCES
314-634-2436

Form Approved. OMB No. 2000-0404. Expires 7-31-86

is required by State law

A. Missouri Manifest Document Number

C. MO. Transporter's ID H = 1039

D. Transporter's Phone (314) 232-9327

0 1 2 5 1

F. Transporter's Phone

G. State Facility's ID

(314) 232-0960

H, Facility's Phone

B. State Generator's ID - other

Information in the shaded areas

0 0

ENERATOR FINAL COPY — PART 2

HIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number, 13. Total I. Waste No. Quantity Wt/Vol RO Wasse Planmeble liquid, W. C. S. Flammable Liquid IN1993 (F005, F003, D001) G E Hazardous Waste, Liquid, N. O. S. 6 0 F NA9189 ORM- E Other R 0 0 DM MO. R Other MO. J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above RO = 100 lbs.15. Special Handling Instructions and Additional Information "If unable to deliver to designated TSD facility, return to generator! 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Printed/Typed Name Month . Day Year 17. Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day Transporter Acknowledgement of Receipt of Materials Date Month Day Printed/Typed Name Signature 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19 Date Day Printed/Typed Name Month EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS

EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE
U.S. COAST GUARD
1-807-4724-9902
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCES
314-634-2436

HAZARDOUS WASTE MANIFEST

GENERATOR FINAL COPY — PART 2

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TSDF.

SHIPMENTS.	HAZANDOUS	WASIEW	ANIFES) [314-634-2436
ease print or type (Form designed for use on elite (12-pi				Form			000-0404. Expires 7-31-8
UNIFORM HAZARDOUS	Generator's US EPA ID No.	06.	Manifest Document No.	2. Page	Inform	ation in	the shaded areas
WASTE MANIFEST	<u> </u>	1139 7	9 93 12 10	of . 1	is requ	ired by	State law.
3. Generator's Name and Mailing Address				A. Missouri Ma	anifest Docur	ment Nu	mber
MCDONNELL DOUGLAS CORPORA	TION WAST. LOUIS			0 11 12) / _e . 5	2	0 2 1 0
PO BOX 516, ST. LOUIS, MI	SSOURT 63166			B. State Gener		THE RESERVE OF THE PERSON NAMED IN	
4. Generator's Phone (314) 232–33	10			A SACTOR S		riner	restable 2 FA
				The second	(A)		MARKET SERVICES
5. Transporter 1 Company Name	3.5	PA ID Number	2000	C. MO. Transp		1-103	39
MCDONNELL DOUGLAS CORPORA	TION 1 1 10	D 0 0 0 8 1	13933	D. Transporter	's Phone (314)	232-9327
7. Transporter 2 Company Name	8. US EF	PA ID Number		E. MO. Transp	orter's ID		
NONE	Litin		1 1 1 1	F. Transporter	's Phone		
Designated Facility Name and Site Address	Control of the Contro	EPA ID Number		G. State Facili	ty's ID	E. Wales	
MCDONNELL DOUGLAS CORPORA	TTOM				724		
	, i i i i i i i i i i i i i i i i i i i			H. Facility's Pl	none		
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ST. LOUIS COUNTY, MO							1
11. US DOT Description (Including Proper Shipping N	lame, Hazard Class, and ID Number	r) .	12. Contain	ers I	13. Total	14. Unit	I. Waste No.
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b.						and the same and the same and	MO
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CORROSIVE MATERIAL UN1			Jaa1	bu la -		G	Other D002
COLUMN TAIL THIATTER STITE			1401	DE 010	10015	9	MO.
" WASTE CORROSIVE SOLID,	N. O. S.						0 1 9 1 2
CORROSIVE MATERIAL UN17	759 D002			1			Other
			2000	MI OC	11/11/10	G	D002
d.	182						MO.
144						,	Othe*
				1 . 1 .	7 7 1		Other
J. Additional Descriptions for Materials Listed Above			LIFE CONTRACT	K. Handling Co	odes for Wast	es Listed	Above
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	Ten And Ventral Section 1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		7 6 %	
) by)						
c ALKALINE SLUDGE	U			1 -1	F Lot	III SA	
d. n					110 1	- 56	
15. Special Handling Instructions and Additional Infor	mation						
"IF UNABLE TO DELIVER I	TO DESIGNATED TST	FACILITY,	RETURN T	IO GENERA	ACOL.		
16. GENERATOR'S CERTIFICATION: I hereby declare labeled, and are in all respects in proper condition							
Unless I am a small quantity generator who has been							
have a program in place to reduce the volume and to	oxicity of waste generated to the deg	ree I have determined to	o be economically p				
or disposal currently available to me which minimize			environment.				Marih Day Van
Printed/Typed Name		Signature	4 1	1 1		,w/	Month Day Year
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19. Discrepancy Indication Space	Neg Neg						
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and of the state o							
20. Facility Owner or Operator: Certification of receipt	of hazardous materials covered by	this manifest except a	s noted in Item 19.				^ /
~ *							Date
Printed/Typed Name		Signature	A 1.18				Month Day Year
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NSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

Ple	ease print or type (Form designed ' if use on elite (12-pitch)	ypewriter.)			Form	Approved. Of	4B No. 2	000-0404.	Expires	7-31-86
A	UNIFORM HAZARDOUS	1. Generator's US EPA ID No.	5	Manifest	2. Page	Informa	ation in	the shad	ed area	as .
4	WASTE MANIFEST	M, O, D, 9, 3, 0, 9; 6	5. 8. 4. 5. 710	ocument No.	of	is requ	ired by	State law		
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	McDonnell Douglas Corpora	ation - St. Loui	1.3		B. State Gene	1117	613	010	112	13
П	P.O. Box 516, St. Louis,	Missouri 63166	ó		B. State Gene	rator's ID - o	ther			
	4. Generator's Phone (314) 232-3319									
	5. Transporter 1 Company Name	6. US EPA	ID Number		C. MO. Transp	orter's ID	H-10	130	1000	Large Line
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	7. Transporter 2 Company Name	8. US EPA	ID Number		E. MO. Transp	orter's ID				
	None				F. Transporter	s Phone				
П	Designated Facility Name and Site Address	10. US EP.	A ID Number		G. State Facili	ty's ID				1-1-20-4
	Managara Campag	2 = 2 = 2						100	- 645	
	McDonnell Douglas Corpor.	361011			H. Facility's Pi	none				
	140 McDonnell Boulevard	1				1077000				
	St. Louis County, Misson		000031			(314) 2		1960		*
	11. US DOT Description (Including Proper Shipping Name	Hazard Class, and ID Number)		12. Containe	ers	13. Total	14. Unit	1. W	aste No	
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E	Hazardous Waste, Liquid,	1.0000		Personal Control of Co			1 -	Other		200
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TRANSPORTER	Printed/Typed Name		gnature ()		1			Month	Day	Year
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9	1 VV) 111/2 3		MULI	A CONTRACTOR	1111			1//	20	00
OR	18. Transporter 2 Acknowledgement of Receipt of Materials				7		-	l	Date	3.5
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	19. Discrepancy Indication Space			- 7						
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MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program

P.O. Box 176 Jefferson City, Missouri 65102 314-751-3176

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

e print or type (Form designed for use on elite (12-pitch) typewriter.)					050-0039, Expires 9-30-8
UNIFORM HAZARDOUS 1. Generator's US EPA ID No.	Manifest Document No	2. Page	-		the shaded areas
WASTE MANIFEST	13177	of .	COLUMN TO SERVICE AND ADDRESS OF THE PARTY.	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN	State law.
3. Generator's Name and Mailing Address		A. Miss	ouri Manifest Docu	ment Nu	mber
McDonnell Douglas Corporation - St. Louis		0.1	1 12 15 11		0101417
P.O. Box 516, St. Louis, Missouri 63166		B. State	Generator's ID - o	other	A
4. Generator's Phone (314) 232-3319					
5. Transporter 1 Company Name 6. US EPA ID Number		C. MO.	Transporter's ID	1_103	9
McDonnell Douglas Corporation	3 9 6 3		sporter's Phone		232 9327
7. Transporter 2 Company Name 8. US EPA ID Number		-	Transporter's ID	12141	232-39321
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9. Designated Facility Name and Site Address 10. US EPA ID Number		-	e Facility's ID		A STATE OF THE STA
McDonnell Douglas Corporation		G. State	e raciity's ID		
140 McDonnell Boulevard					
	0 0 6 0		lity's Phone		
St. Louis County, Missouri MODOO81	. 0 9 0 3	200	(314) 23	32-09	60
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Contain	ers	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a.			Quantity	110 101	MO.
RQ = 100 lbs. Waste Flammable Liquid, N.O.S.					0 1 4 1 3
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MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102

314-751-3176

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

lease print or type (Form designed for use on elite (12-pitch) type				Form Approved. Of	MB No. 2	050-0039, Expires 9-30-88
UNIFORM HAZARDOUS 1. G	Senerator's US EPA ID No.	Manifest	2. Page	Inform	ation in	the shaded areas
WASTE MANIFEST	0,0,0,0,3,1,3,9,2,2,00	ocument No. 5	of _	is requ	ired by	State law.
3. Generator's Name and Mailing Address			A Misso	ouri Manifest Docur	DATE OF THE PERSON NAMED IN	THE STANFORM PRODUCTION OF THE STANFORM OF THE
McDonnell Douglas Corporation	on - St. Touis		19-6.55			
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P.O. Box 516, St. Louis, Mis	180UF1 03100		B. State	Generator's ID - c	ther	
4. Generator's Phone (314) 232-3319						
5. Transporter 1 Company Name	6. US EPA ID Number		C. MO.	Transporter's ID	H-10	39
McDonnell Douglas Corporation	on M. M. D. O. O. S. 1.	8 9 6 3	-	sporter's Phone	1011	1 000 0007
7. Transporter 2 Company Name					(314) 232-9327
11	8. US EPA ID Number		E. MO.	Transporter's ID		
None		1 1 1	F. Trans	porter's Phone		2-5-42 S 55-4
Designated Facility Name and Site Address	10. US EPA ID Number		G. State	Facility's ID	7100	Managery 1 , 27,321
McDonnell Douglas Corporatio	מס		1000			
140 McDonnell Boulevard			11.5			232-0960
		0 0 0 0		ty's Phone	1/1	222 0060
St. Louis County, Missouri	M O D O O O 8 1	3 3 6 3			147	232-0960
11. US DOT Description (Including Proper Shipping Name, Haz	ard Class, and ID Number)	12. Contain	ers	13.	14.	
				Total Quantity	Unit Wt/Vol.	I. Waste No.
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18. Transporter 2 Acknowledgement of Receipt of Materials		7		6		Date
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name	Signature					Month Day Year

19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazard	dous materials covered by this manifest except as n	oted in Item 19				
25. 35mily 5 miles of Specialor, Continuation of receipt of fiazan						Date
District	[6]					Month Day Year
Printed/Typed Name	Signature	-		-	***********	Month Day Teal
	- 3					

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

EPA Form 8700-22 (Rev. 9-86) MDNR-HWG 10 PREVIOUS EDITIONS ARE OBSOLETE

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3176

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

Plea	se print or type (Form designed for use on elite (12-pitch)					Form Approved. Of	MB No. 2	050-0039,	Expires 9-30-88
A	UNIFORM HAZARDOUS	1. Generator's US E	PA ID No.	Manifest Document No.	2. Page	Inform	ation in	the shad	led areas
	WASTE MANIFEST	MODIDIO	10181112191016	2121210	of _	is requ	ired by	State law	1.
	3. Generator's Name and Mailing Address McDonnell Douglas Corpora P.O. Box 516, St. Louis, 1 4. Generator's Phone (314) 232-3319	tion - St.	Louis		0 1	uri Manifest Docum 2 4 8 1 1 1 Generator's ID - o		nber 0 2	2 0
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	McDonnell Douglas Corpora 7. Transporter 2 Company Name	tion	8. US EPA ID Number	713191613		porter's Phone	(314) 232	-9327
	7. Transporter 2 Company Name		8. US EPA ID Number	,		Transporter's ID			
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	9. Designated Facility Name and Site Address McDonnell Douglas Corpora	tion 1	10. US EPA ID Number		G. State	Facility's ID	(
	140 McDonnell Boulevard				H Facili	ty's Phone			
	St. Louis County, Missour	i	M 0 D 0 0 0 8	1 3 9 6 3	, racin		(314) 232	-0960
	11. US DOT Description (Including Proper Shipping Name			12. Contain		13.	14.		
	***					Total Quantity	Unit Wt/Vol.	1. V	Vaste No.
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Ε	b.					10010	i -	MO.	
ZEG	Hazardous Waste, Liquid,	1.0.S.		1	2.30	7000		Other	4-14
R A	ORM-E NA9189	9		0,06	D. W	13000	G	N/A	
TOR.	c.							MO.	
	d.						-	MO.	
						1 1 E T		Other	1
	J. Additional Descriptions for Materials Listed Above			I I	K. Hand	ling Codes for Waste	es Listed	Above	
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	b. Wiste Oil	Substitute Application	E. P. Commercy Con			A STATE	8 7 8		
	C				1	440 4426		trains to a	-1-1-1
	d.				25475			- A	1.0
i	15. Special Handling Instructions and Additional Informati	on	Nation 1						
	"If unable to deliver to	designated	TSD facility,	return to	gene	erator."			
	16. GENERATOR'S CERTIFICATION: I hereby declare that labeled, and are in all respects in proper condition for the lift am a large quantity operator, I certify that I have a prophave selected the practicable method of treatment, stora small quantity generator, I have made a good faith effort	ransport by highway gram in place to reduce age, or disposal curre	according to applicable interna- ce the volume and toxicity of was ently available to me which mini-	ational and national g ite generated to the de mizes the present and	overnmer egree I hav I future thr	nt regulations and ap re determined to be e reat to human health	pplicable conomic and the	state regulation ally practic environme	ulations.
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T	17. Transporter 1 Acknowledgement of Receipt of Material	s -				-			Date
RAZOPORTER	Printed Typed Name ANIC D. M	etts	Signature	iel D	1	neth	-	29	Day Year / 7 8 7
OR	18. Transporter 2 Acknowledgement of Receipt of Material	s	[6]		N	*		, Mar-11	Date
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FACI	19. Discrepancy Indication Space				**				
Ļ	20. Facility Owner or Operator: Certification of receipt of h	azardous materials o	covered by this manifest except	as noted in Item 19.					
Ť	Printed/Typed Name		Signature					Month	Date Day Year
Υ	C CC1	and the same of				Marine La		1	111

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UNIFORM HAZARDOUS

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3176

HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

Form Approved. OMB No. 2050-0039, Expires 9-30-88

Information in the shaded areas

2. Page _

PART 1 GENERATOR FINAL COPY

RETURN FROM AFTER ITS THIS COPY MUST BE RETAINED BY THE GENERATOR THE TSDF.

5 10 Document No. M, O, D, O, O, O, 8, 1, 8:9.5 **WASTE MANIFEST** is required by State law 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number McDonnell Douglas Corporation - St. Louis P.O. Box 516, St. Louis, Missouri 63166 B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 C. MO. Transporter's ID H-1039 5. Transporter 1 Company Name-6. US EPA ID Number McDonnell Douglas Corporation M, O, D, O, O, O, S, 1, 8, 9, 6, 3 (314) 232 - 9327D. Transporter's Phone 8. US EPA ID Number 7. Transporter 2 Company Name E. MO. Transporter's ID None F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID McDonnell Douglas Corporation 140 McDonnell Boulevard H. Facility's Phone M O, D, O, O, O, 8, 1, 8, 9, 6, 3 (314) 232-0960 St. Louis County, Missouri 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 12. Containers Total Unit 1 Waste No. Quantity Wt/Vol. MO. n i RQ = 1 1b.Waste ORM-A, N.O.S. °F001 B (F001, F002) NA1693 GENER Waste Flammable Liquid, N.O.S. RO = 100 lbs.Other. UN1993 (F005, F003, D001) Flammable Liquid MARIT A 0 0 Hazardous Waste, Liquid, N.O.S. Other ORM-E NA9189 d. 0 Waste Corrosive Solid, N.O.S. Other UN1759 (D002) G Corrosave Material 0002 J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above a Chlorinated Solvent b. Flammable Solvent . Waste Oil d Acid Sludge 15. Special Handling Instructions and Additional Information "If unable to deliver to designated TSD facility, return to generator. 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. If I am a large quantity operator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method available to me that I can afford. Month Day Year Printed/Typed Name 0 Date 17. Transporter 1 Acknowledgement of Receipt of Materials Month Day Printed/Typed Name Signature 18. Transporter 2 Acknowledgement of Receipt of Materials Month Day Printed/Typed Name Signature 19. Discrepancy Indication Space F AC 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19 Date T Day Month Printed/Typed Name Signature EPA Form 8700-22 (Rev. 9-86) MDNR-HWG 10 PREVIOUS EDITIONS ARE OBSOLETE

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EPA Form 8700-22 (Rev. 9-86) MDNR-HWG 10 PREVIOUS EDITIONS ARE OBSOLETE

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3176

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802

1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

aase	print or type (Form designed for use on elite (12-pitch) t	ypewriter.)	2				Form Approved. Of	MB No. 2	2050-0039, Expires 9-	-30-88
1	UNIFORM HAZARDOUS	1. Generator's US E	PA ID No.	Ma	nifest ment No.	2. Page	Inform	ation ir	the shaded areas	3
	WASTE MANIFEST	39 01 01 01 0	0.01817.191917.	3 10,0	13, 1, 3	of .	is requ	ired by	State law.	
3.	Generator's Name and Mailing Address				S-Street Street Contract Contr	A. Miss	ouri Manifest Docur	nent Nu	mber	C 21.28
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	P.O. Box 516, St. Louis, Mi						1 2 5 3		0011	3
11.	Generator's Phone (314) 232-3319					B. State	Generator's ID - o	tner		
	denerator at none (,)		,	3,		136				
5.	Transporter 1 Company Name		6. US EPA ID Number			C. MO.	Transporter's ID	H-1(039	
	McDonnell Douglas Corporati	ion	MODICION	8, 1, 8,	9 6 3	D. Tran	sporter's Phone	131/	4) 232-932	L
7.	Transporter 2 Company Name	-016	8. US EPA ID Number		-	F MO	Transporter's ID			7
11	None		1			-	sporter's Phone	100 T. W	in edjer ikilagi i de edje	
1	Designated Facility Name and Site Address		10. US EPA ID Number			-				er Control
9.	McDonnell Douglas Corporati	ion	10. US EPA ID Number			G. State	e Facility's ID			
-		LOH				7.36	(第二) 新加拿新州		SERVICE CONTRACTOR	
П	140 McDonnell Boulevard					H. Facil	lity's Phone			
	St. Louis County, Missouri		MODOOO	8 1 8	9 6 3		(314) 23	22_0	060	
11	1. US DOT Description (Including Proper Shipping Name,	Hazard Class, and	The street of th		12. Contain		13.	14.		
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A	UNIFORM HAZARDOUS	Generator's US EPA ID No.	Manifest Document No.	2. Page	Informa	ation in th	he shaded areas	
T	WASTE MANIFEST	M101D1010101811181917	1 0 0 0 5 1	of	is requ	ired by S	tate law.	
П	3. Generator's Name and Mailing Address			A. Missouri Mi	nifest Docum	nent Numi	ber	100
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П	P.O. Box 516, St. Louis,	Missouri 63166	7 4	B. State Galle	ator's 1D - 0	uici		
П	4. Generator's Phone (314) 232-3319							
П	5. Transporter 1 Company Name	6. US EPA ID Number	la.	C. MO. Transp	The state of the s		A CONTRACTOR OF THE PARTY OF TH	
	McDonnell Douglas Corpor		8, 1, 8, 9, 6, 3	D. Transporter	s Phone (314)	232-9327	A 18.
	7. Transporter 2 Company Name	8. US EPA ID Number		E. MO. Transp	orter's ID		100	d. (b. 3)
П	None			F. Transporter	s Phone		為例言語	
П	9. Designated Facility Name and Site Address	10. US EPA ID Number		G. State Facili	y's ID	13		
П	McDonnell Douglas Corpor	ation	e				40	
П	140 McDonnell Boulevard	w 1		H. Facility's Pl		our Laboria	a in Change and the	2.4.4
П	St. Louis County, Missou	M O D O O	8 1 8 9 6 3		(314)	232-0	960	
	11. US DOT Description (Including Proper Shipping Nam	The second secon	12. Containe	DOUBLES OF THE STORY	13.	14.		
	5				Total Juantity	Unit Wt/Vol.	I. Waste No.	
	a.				luantity	-	MO.	
							0 4	3
1	RQ = 100 lbs. Waste I				110		Other	Associated in
G	Flammable Liquid UNIS	993 (F005, F003, D00)	1)	DIM	11,1,0	A STREET, SQUARE, STREET, SQUARE, SQUA	M001 мо.	200.5
N	RQ = 1 1b. Waste ORM-	A N.O.S.				le le	0141	7
E	ORM-A NA1693 (F001			рм		G	Other	Act of
A		., 1002)	111	D M	155		F001	
T	C.	,				1 100	мо. О I 4 I	
OR	Hazardous Waste, Liquid,	N.O.S.		- 1 th		1 1	Other	44
1	ORM-E NA9189			DM	1 55	G	N/A	
	d.					1	MO.	NO. NO.
	a a						1 I Other	395
П	4						Jules	
	J. Additional Descriptions for Materials Listed Above			K, Handling Co	des for Waste	es Listed A	bove	
	a				La transport			
	Flammable Liquid							A 14/11
11	Chlorinated Solvent							75754
	- Waste Oll			TOTAL TOTAL SECTION		200		10000
	15. Special Handling Instructions and Additional Informa	· ·		المارك.	علبعلتعك			1863
	15. Special Hariding Instructions and Additional Informa							
	"If unable to deliver to	designated TSD facility	ty, return to	o genera	itor."			
	y v							
	16. GENERATOR'S CERTIFICATION: I hereby declare tha							and
	labeled, and are in all respects in proper condition for	The state of the s				Control of the second	The second secon	hati
	If I am a large quantity operator, I certify that I have a pro- have selected the practicable method of treatment, sto	rage, or disposal currently available to me which n	ninimizes the present and	future threat to	numan health	and the en	vironment, OR, if Ja	
	small quantity generator, I have made a good faith effor		ne best waste managemen	nt method availa	ble to me that	4	147.42	
1	Printed/Typed Name	Signature	0 /	1	1 100	۸.	Month Day Y	Year
Y	ANNETTE C. SCHU	ETZ V	un (, A	elin	75	120	100188	1/
TR	17. Transporter 1 Acknowledgement of Receipt of Materia	ıls	E. F. C. L. C. C.		0	• 22	Date	
RAZOP	Printed/Typed Name	Signature		*			Month Day Y	Year
S	12/m /: 11-11	$ \gamma_{k} $	ZIIII		A Charles of the	I Water	10088	171
0	18. Transporter 2 Acknowledgement of Receipt of Materia	ils	SLOT STATE OF THE SAME	Star A			Date	1
RTER	Printed/Typed Name	Signature :		de la company		No. of Part A	Month Day	Year
E	Management of the control of the con		rational and the			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		0.54 S 2.45
	19. Discrepancy Indication Space			1 2 22	t de claten	1425 . F.	Taxas - make	18.5
F	19. Discrepancy indication opace					· .		
Α								
C						可能,基		
L	20. Facility Owner or Operator: Certification of receipt of	hazardous materials covered by this manifest ex	cept as noted in Item 19.	125 138	A Part of			100
1		,					Date	
T	Printed/Typed Name	Signature	0 1/			N	Month Day Y	Year
	Torry & Mast	rs ten	K. Ito	40-		1.	1001818	171
EPA	Form 8700-22 (Rev. 9-86) MDNR-HWG 10 PREVIOUS E	DITIONS ARE OBSOLETE	11/00					

PURCHASE ORDER NO. F74985C

SHIP TO MULTI

DATE

05/12/87

OF 10 1

CHANGE ORDER NO.

SIDS N

UM

PURCHASE ORDER

QUANTITY

COND 0090

A68

INTERNAL

GBS

TERMS:

N/30

F. O. B.

ORIGIN

ROUTING SURFACE-SEE COND 4082

REFERENCE REO. NO. 744542

P O TOTAL

\$260000.00

PLANNER B. E. MCKEE MDC/SUPPLIER

WASTE OIL/SOLVENT REMOVE/DISPOSE*RW

PART NO /NOMENCLATURE/DESCRIPTION

SPECIAL NOTES

REFER TO LWD'S QUOTE DTD 6MAR87.

MISCELLANEOUS NON-RECURRING WASTE OIL/SOLVENT REMOVAL/DISPOSAL

CONTRACTOR TO PERFORM REMOVAL AND DISPOSAL OF 55-GALLON DRUMS OF WASTE ACETONE, ALCOHOL, ALIPHATIC PETROLEUM NAPHTHA, AROMATIC PETROLEUM NAPHTHA, BENZENE, COAL AND FUEL DIL, DIMETHYL POLYSILOXANE, ENAMEL PAINT, EPOXY PAINT, ETHYL ACETATE, ETHYLENE GLYCOL, FORMIC ACID WITH METHYLENE CHLORIDE, GASOLINE, HYDRAULIC OIL, HYDROFLUORIC ACID WITH METHYLENE CHLORIDE AND PHENOL, ION-EXCHANGE RESINS, JP-4 JET FUEL, JP-5 JET FUEL, KEROSENE, LACQUER THINNER, METHYLENE CHLORIDE, METHYL ETHYL KETONE, METHYL ISOBUTYL KETONE, MOTOR OIL, NADIC METHYL ANHYDRIDE, NAPHTHA, PCB-CONTAMI-NATED LIQUID LESS THAN 50 PPM, PERCHLOROETHYLENE, PETROLEUM SOLVENTS, PHENOL, PHOSPHATE ESTER, POLYURETHANE PAINT, POTASSIUM HYDROXIDE WITH PHENOL, SODIUM BICARBONATE WITH PHENOL, SOLIDS (ABSORBENT, RAGS, ETC.) CONTAMINATED WITH SOLVENT OR

10: L. W. D., INC.

P.O. BOX 327 CALVERT CITY, KY 53226-001

ATTN: AMOS SHELTON

42029

P. O. UM

EXTENDED AMOUNT

NOT TO EXCEED

P. O. UNIT PRICE

PAGE

LT

1AC 877F3 (2 JUL 84)

ALL REFERENCES CONTAINED HEREIN TO MCAIR, MCAUTO, MDEC, MDAC—E, ETC., SHALL MEAN MCDONNELL DOUGLAS CORPORATION.

SHIP TO MULTI

DATE

05/12/87

N/30

TERMS: F. O: B.

ORIGIN

ROUTING SURFACE-SEE COND 4082

REFERENCE REQ. NO. 744542

P. O. TOTAL

\$260000.00

MDC/SUPPLIER

PURCHASE ORDER

INTERNAL

1

QUANTITY

UM

SIDS N

PART NO./NOMENCLATURE/DESCRIPTION
OIL, STODDARD SOLVENT, TAR,
TECHNICAL DICHLOROMETHANE,
TOLUENE, TRANSMISSION OIL,
TRICHLOROETHANE, TRICHLOROETHYLENE,
AND XYLENE.

ESTIMATED VOLUME IS 1600 55-GALLON DRUMS PER YEAR.

ALL SHIPMENTS MUST BE DOCUMENTED WITH A HAZARDOUS WASTE MANIFEST. WITHIN TWO WEEKS AFTER RECEIPT OF THE WASTE AT THE DISPOSAL FACILITY, THE COMPLETED GENERATOR COPY OF THE HAZARDOUS WASTE MANIFEST SHALL BE RETURNED TO: ENVIRONMENTAL COMPLIANCE, DEPT. 891C, BLDG. 80, LEVEL 2, MCDONNELL DOUGLAS CORP., P.O. BOX 516, ST. LOUIS, MISSOURI 63166. HAULER SHALL HAVE A MISSOURI HAZARDOUS WASTE TRANSPORTER'S LICENSE.

VENDOR MUST PROVIDE ALL APPRO-PRIATE PERSONAL PROTECTIVE SAFETY EQUIPMENT FOR ALL VENDOR PERSONNEL WHILE ON MDC PREMISES. PAGE 2 OF 10

CHANGE QRDER NO.

10: L. W. D., INC.

P.O. BOX 327 CALVERT CITY, KY

53226-001

42029

ATTN: AMOS SHELTON

P. O. UNIT PRICE

P. O. UM

EXTENDED AMOUNT



LWD, INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

63166

MCDONNELL DOUGLAS CORFORATION ACCOUNTS FAYABLE DEFT. 042 F. O. BOX 516 ST. LOUIS, MO

TRANSFORTATION BY LWD, INC.

DATE:

11/17/86

TERMS:

DUE NET 30

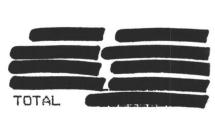
AMOUNT DUE:



AMOUNT

DESCRIPTION

QUANTITY TYPE RATE MANIEEST # 00705 P.O. + E62269C **CB64** 55 GALLON DRUMS 24.000 DRUMS CB63 55 GALLON DRUMS 24.000 DRUMS MANIFEST - QQ17Q 55 GALLON DRUMS CB64 9.000 DRUMS 8.34 X SPEC. GRAV. .999 = 8.3324/GAL. X % CL 19.45 = 1.62 X 55 GAL DRUM X 33 DRUMS = 2,940.3# CL CB64 SURCHARGE ON CHLORINATED MAT 2,940.300 POUNDS CB63 55 GALLON DRUMS 19,000 DRUMS CB65 55 GALLON DRUMS 3,000 DRUMS



0K Len. Dec 86

200,000 MILES

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 10%).

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 314-751-3241 DEPT. OF NATURAL RESOURCES 314-634-2436

e print or type (Form designed 's use on elite (12-pitc	h) typewriter.)		Form Approved. C	MB No. 2000-0404. Expires 7-31-8
UNIFORM HAZARDOUS	Generator's US EPA ID No.	Manifest 2. P	age Inform	nation in the shaded areas
WASTE MANIFEST	M O D O O O 8 1 8 9 0	3 9 7 9 5	of is requ	uired by State law.
MCDONNELL DOUGLAS CORPOR P.O. BOX 516, ST. LOUIS,	ATION - ST. LOUIS MISSOURI 63166 *	0	Missouri Manifest Docu 1 1 1 0 1 0 1 State Generator's ID -	1 0 7-10 5
Generator's Phone (314) 232-3319				
. Transporter 1 Company Name LWD . LNC .	6. US EPA ID Number	4 3 8 8 1 7	AO. Transporter's ID	H-1082
Transporter 2 Company Name	8. US EPA ID Number	14.000	IO. Transporter's ID	(306) 333-0343
NONE		Property Control of the Control of t	ransporter's Phone	
Designated Facility Name and Site Address	10. US EPA ID Number		State Facility's ID	
	10. 03 EFA 10 Number	9.5	itale (dulity a se	
LWD, INC.			ETTE 284 388	Dress to the contract of
P.O. BOX 327, HWY. 1523			actity's Phone	
CALVERT CITY, KENTUCKY	$42029 K_1Y_1D_1O_13_18_1$	4,3,8,8,1,7		
US DOT Description (Including Proper Shipping Nat	ne, Hazard Class, and ID Number)	12. Containers	13. Total Quantity	14. Unit Wt/Vol.
HIAME ONLY ALOC		1		IME TO SEE THE
WASTE ORM-A, N.O.S.		0 2 4 5	W	P
ORM-A NA1693		0 2 4 D	1/59,00	P POOL
			11000	MOS
HACTE ET ANGLETT TTOHTE	N O C		1	Edding of
WASTE FLAMMABLE LIQUID,		0, 2, 4 D	115901	Other
FLAMMABLE LIQUID UN19	93	0 2 4 0	7/10/10/0	T WO
		2 m		
				Other
				2000年 1000年
Chlorinated Solvent CB64 Flammable Solvent CB63	Not 3/8	70		
Special Handling Instructions and Additional Informa	ation			
,		רד ואסוויינים עים.	CTNTPATOR !!	
"IF UNABLE TO DELIVER TO	DESIGNATED ISD FACILL	LI, ALLUMN IO	GENERATOR.	
KY-209				
GENERATOR'S CERTIFICATION: I hereby declare the labeled, and are in all respects in proper condition for Unless I am a small quantity generator who has been en have a program in place to reduce the volume and toxi- or disposal currently available to me which minimizer.	r transport by highway according to applicable in xempted by statute or regulation from the duty to r city of waste generated to the degree! have determ	ernational and national gover nake a waste minimization cert ined to be economically practi	nment regulations and a fication under Section 3	applicable state regulations. 002(b) of RCRA, I also certify that I
Printed/Typed Name	Signature	71001	A	Month Day Year
B:11 NO17	0	Bill Hal	te	1/1/1/8/
2111 14021				71/1/1996
Transporter 1 Acknowledgement of Receipt of Mater Printed/Typed Name	Signature			Month Day Year
Printed/Typed Name	Signature	1.7.	0	Month Day rear
Tizk	/ Vied	Kupa Vice		1 13 26
Transporter 2 Acknowledgement of Receipt of Mater				Date
Printed/Typed Name	Signature			Month Day Year
Discrepancy Indication Space				
. Facility Owner or Operator: Certification of receipt of	hazardous materials covered by this manifest ex	cept as noted in Item 19.		
				Date
Printed/Typed Name	Signature		7	Month Day Year
ACOS H. SHELTON IR	11	171 / F. 1	100	16 11 14 1 3
STILL GIVE THE	•	1 1 1 1 1 1	1	

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

INSTRUCTIONS FOR THE COMPLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

Please print or type (Form designed for use on elite (12-pitch) typewriter.)					No. 2000-0404. Expires 7-31-86
UNIFORM HAZARDOUS 1. Generator's US E	EPA ID No.	Manifest 2.	Page	Informatio	n in the shaded areas
WASTE MANIFEST	0 3 1 8 9 0 6000	İ. 1.0	of	is required	by State law.
3. Generator's Name and Mailing Address			: Missouri Man	fest Document	Number
MCDONNELL DOUGLAS CORPORATION - ST.	LOUIS				
P.O. BOX 516, ST. LOUIS, MISSOURI		£0	CONTRACTOR OF CONTRACT DO CONTRACT	4 8 ors D - other	10.10 17.10
4. Generator's Phone (314) 232–3319	03200		Stare General	OF STO Other	
5. Transporter 1 Company Name	6. US EPA ID Number	G	MO. Transpor	ter's ID	1000
LWD, INC.	K, Y, D, O, 8, 8, 4, 3	3 3 1 7	Transporter's	Phone /c	023-205-8312
7. Transporter 2 Company Name	8. US EPA ID Number	E	MO. Transpor		
NONE .	1		Transporter's	Phone	
Designated Facility Name and Site Address	10. US EPA ID Number	100	State Facility	7-0	
LWD, INC.	10.00 2.11 12 114		EXD088		
P.O. BOX 327, HWY. 1523		- A	Facility's Pho	ne	
CALVERT CITY, KENTUCKY 42029	K, Y, D, O, 8, 8, 4, 3	3 8 4 7	(502)		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and	ID Number)	12. Containers			4. P. A. P. P. A. P. P. A. P. A. P. A. P. P. A. P. P. A. P. P. A. P. P. A. P. P. P. A. P. P. P. P. P. P. P. P. P. P. P. P. P.
					nit I. Waste No.
a	4	E 1		Law New	MO SESSEE SESSEE
WASTE ORM-A, N.O.S.	7				
ORM-A NAL693		0 0 90	MZ	726	P Other
b.				1000	110
N WASTE PLANMARIE ITOUTD NOS					
	,	10 1 0		011	Other
FLAMMABLE LIQUID UN1993		0,1,9	7 1	866	P TOOK
T C.					MO
HAZARDOUS WASTE, LIQUID, N.O.S."					
ORM-E NA9139		0, 0, 3 1	D. M . /.	242	P
d.				5775	MC.
			1.	3	
		1 1	1	,	Other
J. Additional Descriptions for Materials Listed Above		K	Handling Code	es for Wastes Li	sted Above
a Chlorinated Solvent CB64			1 1	K-T-	1. 10 (1.1)
h Flammable Solvent CB63				1 1	10-4-5
Waste Oil CB65 (not a federally reg	wisted waste)				30/10/
d. The second se	The second second		4		
15. Special Handling Instructions and Additional Information				BEEN STREET STREET	
	. man magritum noo	OIII VARITIO	OFFITTION AND	an 6	ROSS 44670
"IF UNABLE TO DELIVER TO DESIGNATED	TSD FACILITY, RE	TURN TO	GENERAT	OK MOTY	3/8/0
KY-210				han	NET 12860
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this co	onsignment are fully and accurately des	cribed above by p	propershipping	name and are cl	
labeled, and are in all respects in proper condition for transport by highway					
Unless I am a small quantity generator who has been exempted by statute or r have a program in place to reduce the volume and toxicity of waste generated					
or disposal currently available to me which minimizes the present and future			citoable and ina	ve selected the	method of treatment, storage,
Printed/Typed Name	Signature	1.11/	-		Month Day Year
Bill NOLLE	- Donald	Holl o	2 .	*	11.11/3184
T 17. Transporter 1 Acknowledgement of Receipt of Materials		477			Date
Printed/Typed Name	Signature				Month Day Year
20.11	21	/	n		1 . 1 -1-61
Ticky viced	Tre far	lead			1 17 34
18. Transporter 2 Acknowledgement of Receipt of Materials	- f				Date
Printed/Typed Name	Signature				Month Day Year
ā					
19. Discrepancy Indication Space					
F					
A					
20. Facility Owner or Operator: Certification of receipt of hazardous materials of	overed by this manifest except as note	d in Item 19.			
					Date
Printed/Typed Name	Signature	1	1		Month Day Year
AMOS H. 88ELFON JR.	VV MAN	11 1	1 ~ , \	1 /- A	2 11 1 h 4 kg. 1
PA Form 8700-22 (Rev. 4-85) MDNR-HWG 10	- JAHLY/AY	-11- 4	11/1/	11111	TT 11 4 100



LWD, INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

63166

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, MO

DATE:

12/09/86

TERMS:

DUE NET 30

AMOUNT DUE:



ESCRIPTION

	QUANTITY	TYPE	RATE	THUOMA
MANIEESI - 01248 0173				
E-QE62269C			_	
CB64 55 GALLON DRUMS	5.000	DRUMS		
CB63 55 GALLON DRUMS	20.000	DRUMS		
CB66 HAZARDOUS WASTE	1.000	DRUMS		
MANIEESI # 01001 0724			,	
P.D E62269C				
CB64 55 GALLON DRUMS	6.000	DRUMS		
CB63 55 GALLON DRUMS	35.000	DRUMS		SEE STATE
CB64 SURCHARGE ON CHLORINATED MAT	2,445,960	FOUNDS		
8.34 X SPEC. GRAV. 1.4=	*			
11.676#/GAL. X % CL 31.74 =				
3.706 X 55 GAL. DRUM X 12 DRUMS =				
2,445.96 ÷ CL				
WAIT TIME	4.000	HOURS		
TRANSPORTATION BY LWD, INC.	200.000	MILES		

IF NOT PAID WITHIN SO DAYS FROM RECEIPT, A CARRYING CHARGE OF CHE & ONE-HALF PERCENT PER MONTH WILL BE ABDED (TOTAL ANNUAL RATE, 10%).

Ox ben 09. Jan 87

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802

HAZARDOUS WASTE MANIFEST

CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

Plea	ase print or type (Form designed for use on eite (12-pitch			• 7 ^	Form A	pproved. OMB	No. 2000-0404. Exp	oires 7-31-86•
A	UNIFORM HAZARDOUS	1. Generator's US EPA ID No	. Ma	anifest 2.	Page	Informatio	n in the shaded	areas
T	WASTE MANIFEST	M O D O O 8	1 8 9 0 6 0 0	XXXX	of	is required	by State law.	
	3. Generator's Name and Mailing Address			A	Missouri Mar	rifest Document	Number	
	MCDONNELL DOUGLAS CORPOR	ATION - ST. LOU	JIS			1413	0.115	7 12
	P.O. BOX 516, ST. LOUIS,	MISSOURI 6316	56	a		tor's ID - Other		
	4. Generator's Phone (314) 232-3319				1127		* * *	- A
	5. Transporter 1 Company Name	6. US E	PA ID Number	· c.	MO. Transpo	rter's ID	1082	
	LWD, INC.	K, Y	D, 0, 8, 8, 4, 3, 8,	Lancas and Control of the Control of	Transporter's	The second second second second second second	502) 395-	8313
	7. Transporter 2 Company Name		PA ID Number		MO. Transpo	rter's ID		Fac
	NONE	1			Transporter's			N O
	9. Designated Facility Name and Site Address	10. US	EPA ID Number	(e	State Facility	9.10		
	LWD, INC.					0884388		
	P.O. BOX 327, HWY. 1523				Facility's Pho	me ·		o o
	CALVERT CITY, KENTUCKY	42029 KIYI	DI 01 81 81 41 31 81	8 1 7	(-)	2) 1952		Vacc
	11. US DOT Description (Including Proper Shipping Nam			12. Containers	THE PERSON NAMED IN		4.	
	*						nit I. Wast	e No.
	a.					-	WO.	e No.
	WASTE ORM-A, N.O.S.							
G	ORM-A NA1693			0 0 5	M D Z	165	P	
E	b.						(40 -	dOT-PGDATO
N	WASTE FLAMMABLE LIQUID,	N.O.S.					Call Control	Q I
R	FLAMMABLE LIQUID UN19	93		9291	BO M	661	P	2
T	C.						MO.	ш
OR	WASTE CORROSIVE LIQUID,	N.O.S.						
H		1760		991	MIDO	433	P	
	d.				1		DC N	
		, , , , , , ,				1		
	1	1	11	Xi			O. I. I.	
	J. Additional Descriptions for Materials Listed Above			K	Handling Coo	les for Wastes Li	sted Above	5.00
	a CHLORINATED SOLVENT CB64				106	307	1.41	∑
	b FLAMMABLE SOLVENT CB63				106	107	1 1	
	4 CORPRYS DENT CHE OR TORE PRICE!	L/PORMIC ACTU	CB46		106	107	100	2
	d.				7 10 100			2
	15. Special Handling Instructions and Additional Informa	ion		and the second second second		AND THE PROPERTY OF THE PROPER		m m
	"IF UNABLE TO DELIVER TO	DESTGNATED TSI	D FACILITY RE	TURN TO	GENERA	TOR."		TER ITS RETURN FROM
	КУ-212			17.	. *		~	0
	16. GENERATOR'S CERTIFICATION: I hereby declare tha	the contents of this consignmen	nt are fully and accurately descr	rihed above by n	ronershinning	name and are cl	assified nacked m	antical and I
	labeled, and are in all respects in proper condition for							ons
	Unless I am a small quantity generator who has been exhave a program in place to reduce the volume and toxic							ertify that I
	or disposal currently available to me which minimizes							Y A
	Printed/Typed Name	1	Signature	C 1	, 1)	Month Da	ertify that Int, storage,
<u> </u>	TOHN SKAR	IN	John	Ali	an	~	1120	886 6
T	17. Transporter 1 Acknowledgement of Receipt of Materia						Dat	I
TRANSPORTER	Printed/Typed Name		Signature				Month Da	y Year
SP	KANDY FOX		Kandy	19			1120	<u> </u>
OR	18. Transporter 2 Acknowledgement of Receipt of Materia		V				Dat	e H
TE	Printed/Typed Name		Signature				Month Da	y Year
R								y Year W Ad OO
	19. Discrepancy Indication Space							u u
FA								- B
С								SO
L	20. Facility Owner or Operator: Certification of receipt of	hazardous materials covered by	this manifest except as noted	in Item 19.				2
1	, , , , , , , , , , , , , , , , , , , ,	,	^				Dat	e o
T	Printed/Typed Name	I	Signature	111	17		Month Da	y Year o
'	Amos H. Shelte	on Jr. A	MICONOV	14.1	LOIX	4/1	A 12/09	9 36. ≝

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102

INSTRUCTIONS FOR THE COM-

PLETION OF THIS FORM ARE ON A

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

SEPARATE SHEET.

314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

ase print or type (Form designed for use on elite (12-pitch) typewrit		Form Approved. OMB N	lo. 2000-0404. Expires 7-31-86
UNIFORM HAZARDOUS 1. Gene	erator's US EPA ID No.	Manifest 2. Page Informatio	n in the shaded areas
WASTE MANIFEST M O	D 0 0 0 8 1 8 9 6 3 0 0 0	of is required	by State law.
3. Generator's Name and Mailing Address		A Missouri Manifest Document	Number
MCDONNELL DOUGLAS CORPORATION	N - ST. LOUIS	011101011	10 17 12 14
P.O. BOX 516, ST. LOUIS, MISS	SOURI 63166	B. State Generator's ID - other	
4. Generator's Phone (314) 232-3319			
5. Transporter 1 Company Name	6. US EPA ID Number	C. MO. Transporter's ID	1082
LWD, INC.	K, Y, D, O, 8, 8, 4, 38		A MUSIC SHOPE STORY OF STORY
7. Transporter 2 Company Name	8. US EPA ID Number	E. MO. Transporter's ID	PART
HONE		And the state of t	A
Designated Facility Name and Site Address	10. US EPA ID Number	F. Transporter's Phone G. State Facility's ID	-
1	10. US EFA ID Number		19.
ĽWD, INC.			À
P.O. BOX 327, HWY. 1523		H. Facility's Phone	8313 Adoo
CALVERT CITY, KENTUCKY 4202			The second secon
11. US DOT Description (Including Proper Shipping Name, Hazard	I Class, and ID Number)		4. nit T. Waste No.
		Quantity Wt/	Vol.
a.			A. nit J. Waste No IV
WASTE ORM-A, N.O.S.		0 2-6 0 36 0 0 0 1	Other
ORM-A NA1693		0 0=6 D M 02620	P MOOL O
b.			P Other POOL P OTHER P OTHER
WASTE FLAMMABLE LIQUID, N.O.	S.		C C
FLAMMABLE LIQUID UN1993		0,3,5 DM 1,5,28,9	P POOR Z
c.			мо
			是在一个经济,但从1500年3月1日的 15000000000000000000000000000000000000
		1 1 . 1 1 .	Other
d.			MO
,		1 1 1 1	Other
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Li	
			Σ E
a CHLORINATED SOLVENT CB64		T 0 6 T 0 7	0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b. FLANMABLE SOLVENT CB63		T O O T O T	
C.			
d.			A LA LA LA LA LA LA LA LA LA LA LA LA LA
15. Special Handling Instructions and Additional Information			
"IF UNABLE TO DELIVER TO DES	IGNATED TSD FACILITY, B	ETURN TO GENERATOR."	ZT ST
KY-211	F 1		
16. GENERATOR'S CERTIFICATION: I hereby declare that the conte	ents of this consignment are fully and accurately de	scribed above by proper shipping name and are of	assified packed marked and
labeled, and are in all respects in proper condition for transport			able state regulations
Unless I am a small quantity generator who has been exempted b			
have a program in place to reduce the volume and toxicity of was or disposal currently available to me which minimizes the prese			method of treatment, storage,
Printed/Typed Name	Signature		Month Day Year
JOHN SKARIN	Valen	Marin	11,210,818,61 8
17. Transporter 1 Acknowledgement of Receipt of Materials	1		
Printed/Typed Name	Signature		Date H
Davidu End	\mathcal{D}	1- 7-1	11,7081816 6
MANGY FOX	1 Amaj	704	Date
Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name	Signature		Month Day Year
· ·····teu/ i ypeu italiie	Signature		
			Date Month Day Year
19. Discrepancy Indication Space			m m
			Date Date Month Day Year
			ns
20. Facility Owner or Operator: Certification of receipt of hazardou	is materials covered by this manifest except as no	ted in Item 19	Σ
23. 1 admity Owner of Operator, Certification of receipt of hazardou			Date
Printed/Typed Name	Signature	11	Month Day Year
Amos A. Shelton Jr.		XI. I.J. D. 1 15 MY.	12 09 d6 E
dwos d. odercon dr.	·	XMIT HUK I A NOT TO	7 14 A2 00 F



LWD, INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

63166

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, MO DATE:

12/19/86

TERMS:

DUE NET 30

AMOUNT DUE:



DESCRIPTION

QUANTITY TYPE

18.000 URUMS

RATE

AMOUNT

300.960 POUNDS 35.000 DRUMS 200.000 MILES



Den 87

IF NOT PAID WITHM 30 DAYS FROM RESERPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 15%).

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed : a use on elite (12	2-pitch) typewriter)		Form Approved OMB No.	2000-0404. Expires 7-31-86
UNIFORM HAZARDOUS	1. Generator's US EPA ID No.	Manifest 2.		n the shaded areas
WASTE MANIFEST	M,0,D,0,0,0,8,1,8,9	6.3 O O 7 3 4	of is required by	
3. Generator's Name and Mailing Address	1102300023		Missouri Manifest Document No	
	DOBARTON OR TOUTS			
MCDONNELL DOUGLAS COR			1,0,0,1	0, 7, 3, 4
P.O. BOX 516, ST. LOUI		8.	State Generator's ID - other	
4. Generator's Phone (314) 232-23	The same of the sa			
5. Transporter 1 Company Name	& US EPA ID Num		MO. Transporter's ID H-10	
LWD, INC.	K1Y1D1018		Transporter's Phone (502	Control of the Contro
7. Transporter 2 Company Name	8. US EPA ID Numi	ber	MO. Transporter's ID	PA
MONE			Transporter's Phone	
Designated Facility Name and Site Address	10. US EPA ID Nun	nber G.	State Facility's ID	
LWD, INC.	73 22		*KTD068436817	P
P.O. BOX 327, HWY. 153			Facility's Phone	COPY
CALVERT CITY, KENTUCK	X 42029 K Y D 0 8	8 4 3 8 8 1 7	(502) 395-891	0
11. US DOT Description (Including Proper Shippin	ng Name, Hazard Class, and ID Number)	12. Containers	13. 14.	1. Waste No.
			Total Unit Quantity Wt/Vo	I Waste No.
a.			077014	
WASTE ORM-A, N.O.S.		(KNX)018	0117714	BITTO
G ORM-A NA1693		0, 1, 6 I	M 15155 P	Unar
E b.				ENDERATOR SOUNDS
WASTE FLAMMABLE LIQUI	D. N.O.S.	035		
R' ETAMMARTE TIDITO IN	N1993	KM 0-4-0-1	M 1.5/1.55 P	Other Z
A FESTERALIS HIQUID O	42773		1 3 7 3 2	MO G
0				
R	3	nckee.		Other
d.				100
l (^u ·			1	
				Other.
J. Additional Descriptions for Materials Listed Abo			Handling Codes for Wastes Liste	RETURN FROM
a Chlorinated Selvent C	B64	1	C10 16 T + 017	LI LI E
Flammable Solvent CB6	9	1	0 16 T 10 7	I I Z
c.			1 1 1 1 1 1	
d.	(F) E 10 (F) (F) (F)			
15. Special Handling Instructions and Additional In		remi seminar do	OTIMED AMOD II	IIS
	TO DESIGNATED TSD FACIL	LITY, RETURN TO	GENERALUK.	<u>~</u>
KY-313	TOTAL WT. OF MA	TEILIAL = 32	450 #	FEB
16. GENERATOR'S CERTIFICATION: I hereby deck	are that the contents of this consignment are fully an	d accurately described above by p	roper shipping name and are class	ified packed marked and
	ion for transport by highway according to applicab	_		e state regulations.
have a program in place to reduce the volume an	peen exempted by statute or regulation from the duty ad toxicity of waste generated to the degree I have de	termined to be economically prac-		f RCRA, I also certify that I
or disposal currently available to me which min	imizes the present and future threat to him and re-	trand/the environment.	OWNEL DOUGLAS	GRP
Brinted/Typed Name	Signature			e state regulations. f RCRA, I also certify that I chod of treatment, storage, Month Day Year
KICHARD JONE	is fu	hond fore		1121181816
T 17. Transporter 1 Acknowledgement of Receipt of I	Materials			Date
Printed/Typed Name N S A A A A A A A A A A A A A A A A A	Signature	$\langle a \rangle$		Month Day Year
S WAYNE CAPAG	211	ne Danne		411/11/16
0 18. Transporter 2 Acknowledgement of Receipt of	Materials	4		Date Month Day Year
O 18. Transporter 2 Acknowledgement of Receipt of I Printed/Typed Name	Signature	<i>*</i>		Month Day Year
E R				
19. Discrepancy Indication Space				m .
F				H
A				US
C				Date Month Day Year
20. Facility Owner or Operator: Certification of rece	eipt of hazardous materials covered by this manifes	at except as noted in Item 19.	-	
I				Date
Y Printed/Typed Name	Signature	A .	1 //	Month Day Year
Amos II. SMelton	· War		1 Mex to trave	to the local FF
PA Form 8700-22 (Rev. 4-85) MDNR-HWG 10	· · · · · · · · · · · · · · · · · · ·	DJ / to x	- John Maria	1



LWD, INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

63166

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, MO

DATE:

1/19/87

TERMS:

DUE NET 30

AMOUNT DUE:

DESCRIPTION

QUANTITY TYPE RATE

AMOUNT

MANIFEST # 01248 0181

P.D. # E62269C

CB63 55 GALLON DRUMS CB64

55 GALLON DRUMS

8.34 X SPEC. GRAV. 1.194 =

9.958#/GAL. X % CL. 46.8 =

4.660#/GAL X 55 GAL DRUM X

X 12 DRUMS = 3,075.6# CL

SURCHARGE ON CHLORINATED MAT. 3,075,600 POUNDS 2.000 DRUMS

55 GALLON DRUMS CB65

MANIEESI - 01001 0755

55 GALLON DRUMS CB63

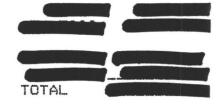
TRANSPORTATION BY LWD, INC.

31.000 DRUMS

12.000 DRUMS



35.000 DRUMS 200,000 MILES



OK

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).

EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102

314-751-3241

U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

se print or type (Form designed tur use on elite (12-pi				1)	Form Approved. Of	/В No. 2	000-0404. Expires 7-31
UNIFORM HAZARDOUS	1. Generator's US EPA ID I	No.	Manifest cument No.	2. Page	_		the shaded areas
WASTE MANIFEST	M 0 D 0 0 0	8, 1, 8, 9, 0, 6, 0	$j_1 \pm j_1 + j_1 \pm j_2$	of .		_	
3. Generator's Name and Mailing Address MCDONNELL DOUGLAS CORP	ORATION - ST. I	OUIS		C 12 (12 (2 (12 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2	ouri Manifest Docum	THE REPORT COME	 Decide Title William To Light Title Title William To Light Title
P.O. BOX 516, ST. LOUI	the state of the s					- BICHESE	0,1,8,
4. Generator's Phone (314) 232-331				B. State	Generator's ID - o	ther	
5. Transporter 1 Company Name		504 IO No.		400			
LWD, INC.		EPA ID Number D 0 3 8 4 3 8	8 1 7	2012/10/20 00 00 00 00 00 00 00 00 00 00 00 00 0	Transporter's ID	-	AND THE PROPERTY OF THE PROPER
7. Transporter 2 Company Name		EPA ID Number			STATE AND COMPANY OF THE RESIDENCE	502)	395-8313
NONE	8. 03	EPA ID Number		PER AD 1589	Transporter's ID		
9. Designated Facility Name and Site Address	10.11	S EPA ID Number		1	sporter's Phone		
LWD, INC.	10. 0	S EFA ID Nullibel					
P.O. BOX 327, HWY. 152	3				YD08843881 ity's Phone	J = -	
CALVERT CITY, KENTUCKY	42029 K Y	T D O 8 8 4 3 8	8 1 7			10.4	
1. US DOT Description (Including Proper Shipping N			12 Contains	re (502) 395–8	14.	
The Devision (modeling Proper Simpping N	ino, riazaro Olass, and ib riam	10017	12. Containe		Total :	Unit	1. Waste No.
			-		Quantity	Wt/Vol.	MO.
RQ WASTE FLAMMABLE LIQ	UTD NOS		031				01413
FLAMMABLE LIQUID UN	1993 (F005,	F003 D001)		DM	13502	P	Other design of the second
D. FLANDABLE LEQUED OF	1555 (1005,	1000, 2002/	0 3 0	27.1		-	T005
RQ WASTE ORM-A, N.O.S.			012				U 4 3
ORM-A WA1693 (FO	01 F002)		3 3 3	· DM	052 26	P	Other
ONITA MARCOSO (FO	01, 1002)		1	-	20 7	-	MO. 001
HAZARDOUS WASTE, LIQUI	DNOS			7	7		0 14 1
	D, M.O.D.		0, 0, 2	DM	00871	P	Other N/A
ORM-E NA9189			0 0 2	10	1		MO.
				1/	V.		1 10 4 5
A region of the					(3)		Other
I. Additional Descriptions for Materials Listed Above				K. Hand	ling Codes for Waste	s Listed	Above
FLAMMABLE LIQUID CB63	PO-100 TRC		A. A. A. A. A. A. A. A. A. A. A. A. A. A	my ?) 6 T 0 7	1	Topical Services
CHLORINATED SOLVENT CE		•	1900	And the second	0 6 T 0 7	And Strangers	-2-13 F3 F3 F3
WASTE OIL (NOT A FEDER			PT. 12-15.	HEAD SHEET STATE	0 6 7 0 7	Call-Arssett	
WASIE UIL (NUI A PADER	ALL REGULATION						
15. Special Handling Instructions and Additional Infor							
"IF UNABLE TO DELIVER	TO DESIGNATED T	ISD FACILITY, F	ETURN	TO-6	ENERATOR.'	7	
KY-215							
6. GENERATOR'S CERTIFICATION: I hereby declare	hat the contents of this consigna	nent are fully and accurately des	cribed above b	V Droper	shipping name and a	re classif	ad packed marked a
labeled, and are in all respects in proper condition							
Unless I am a small quantity generator who has been have a program in place to reduce the volume and to							
or disposal currently available to me which minimize				1,035	garanta bara	27-23	0
Printed/Typed Name		Signature		1		1	Month Day Ge
TOHN SKARIN		Jahn		Kar	un	1 85	011148
7. Transporter 1 Acknowledgement of Receipt of Mat	rials	1		457.45	Maria James	1.000	Date C
Printed/Typed Name		Signature	, -	.0	I de la la companya de la companya d		Month Day
RickyU	ed	Keek	of the	1			011168
8. Transporter 2 Acknowledgement of Receipt of Mat	urials					3° (}-	Date
Printed/Typed Name		Signature			是主義法		Month Day Ye
					1.444 3.144 (C.) (C.)	可可证	[百里青星春
9. Discrepancy Indication Space				744			
				KO TA		73.5	
0. Facility Owner or Operator: Certification of receipt	of hazardous materials covered	by this manifest except as note	ed in Item 19.				A 100 100 100 100 100 100 100 100 100 10
		1) 11	M	1			Date
Printed/Typed Name	×	Signature / //	11/2 8	ya-			Month Day Ye
- Lake F some	25 70	1 0 000 2	MIL	1			01 10 2

GENERATOR FINAL COPY — PART 2

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TSDF.

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSCURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
.CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCES
314-634-2436

GENERATOR FINAL COPY — PART 2

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TSDF.

ease print or type (Form designed for use on elite (12-pit								000-0404. Expires	
UNIFORM HAZARDOUS	1. Generator's US EPA ID N	ง. 8 ₁ 1 ₁ 8 ₁ 9 ₁ 6 ₁ 3 ไ ๋0ั๋๋	Manifest ocument No.	2. Page	1			the shaded are	as
WASTE MANIFEST	$ A_1 O_1 D_1 O_1 O_1 O_1 $	217 2 3 2 2 3 2	1199	of _		-	-	State law.	- E
3. Generator's Name and Mailing Address				-H6-9x5-03	ouri Manif	500 A Self-all Co.	MARKING STREET	- Charles and the Portion	
MCDONNELL DOUGLAS CORPO					1 0		ELEGENON	0 7 5	1.2
P.O. BOX 516, ST. LOUIS		166		1000	Generato	Comments of the Comments of th			
4. Generator's Phone (314) 232-331			** * * * * * * * * * * * * * * * * * *		Colorina.	THE PARTY OF PARTY	Control of the Control	W. Co. The Staff Charles of Children	CHAIN.
5. Transporter 1 Company Name		EPA ID Number						2	254
LWD, INC.		D 10 18 18 14 13 1	3181117	DOM: THE PARTY	CONTRACTOR OF THE		502)	395-831	3
7. Transporter 2 Company Name	8. US	EPA ID Number		E. MO.	Transport	er's ID			
NONE				1907-1907-08	sporter's F	G-14-3-21-7627	30.00	AND THE PARKET	
9. Designated Facility Name and Site Address	10. US	S EPA ID Number		G. State	Facility's	ID.			
LWD, INC.	,			1000		08843	18817	****	
P.O. BOX 327, HWY. 1523		D 0 0 0 1 2	0 0 1 7	100 miles 200 miles	ity's Phon	e			
CALVERT CITY, KENTUCKY		D 0 8 8 4 3	THE R. P. LEWIS CO., LANSING, MICH. 4914			2) 39	1	13	
11. US DOT Description (Including Proper Shipping No.	ame, Hazard Class, and ID Numi	ber)	12. Contain	ers	To	3. ital ntity	Unit Wt/Vol.	I. Waste No).
a						7		MO: 4	3
RQ WASTE FLAMMABLE LIQU					1 11	1120		Other	
FLAMMABLE LIQUID UNI	L993 (F005,	F003, D001)	0,3,5	DM	1,4	750	P	7005	
b.								MO.	100
			i				1	Other	100
Commission of the commission o						1 1		EPRI STAR	2 (4.3
c.	Mckee							MO.	
<i>y</i> .								Other	
d.								MO.	
		2 1 1 1 1			197		1	Other	公司 (対抗) 公主のよう
					1 1	1 1			
J. Additional Descriptions for Materials Listed Above				K. Hand	ding Code	s for Wast	es Listed	Above	Chair
a. FLAMMABLE SOLVENT CB63	RO+100 LBS:			Ţ	016	T1017	7	Tigo Hear	1
b. We will be a supply of the					430	Trip	1		1
C. The second se				100	37. 1				
d	<i>可谓是</i> 为4年6		10000000000000000000000000000000000000			1 1	3 3 1	有一种	1.0
15. Special Handling Instructions and Additional Inform	nation								
"IF UNABLE TO DELIVER	TO DESTGNATED T	SD FACILITY.	RETURN	TO G	ENERA	TOR.	7		
KY - 214		,							
16. GENERATOR'S CERTIFICATION: I hereby declare to	nat the contents of this consignm	nent are fully and accurately d	escribed above	by proper	shipping	name and a	are classif	ied, packed, marke	ed, and
labeled, and are in all respects in-proper condition f	or transport by highway accordi	ing to applicable internationa	ar and national g	governme	ent regulat	ions and a	pplicable	state regulations.	
Unless I am a small quantity generator who has been have a program in place to reduce the volume and to									
or disposal currently available to me which minimize	es the present and future threat	A	ironment.	2-13-13		POINT N	ALIEN I		0-
Printed/Typed Name		Signature	CV		50.			Month Day	Sea
JOHN SKARIN		John	37	ar	in.			0,116	q.
17. Transporter 1 Acknowledgement of Receipt of Mate	rials			1000			LONG TO	Date -	0
Printed/Typed Name	, , ,	Signature .	1 1	0				Month Day	O ea
Mick	Wied	Luck	by the	y	er jû, ere		- 1 - 11	9/11/6	4
18. Transporter 2 Acknowledgement of Receipt of Mare	rials		*	272-	40.00	E de l'en-	Selfer Ter	Date David	6-04 0
Printed/Typed Name		Signature				The Part		Month Day	Yea
And Albert Market and a transport	100.4			epot 2	es Mars	430A0355	and te	73	
19. Discrepancy Indication Space									
			wing Line						
20. Facility Owner or Operator: Certification of receipt	of hazardous materials covered	by this manifest except as no	oted in Item 19.	0.1					
		-11	11					Date	
Printed/Typed Name		Signature /	1/ 5	1	1			Month Day	Yea
· Amag II Challan	~pe	11/1/11/20	1000	1	-			01 119 1	3
Amoe II Shell form Form 8700-22 (Rev. 4-85) MDNR-HWG 10		1, 115/				-			



LWD, INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

MCOONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. D. BOX 516 ST. LOUIS, NO

63166

2/09/87

DATE:

DUE NET 30

TERMS:

AMOUNT DUE:

DESCRIPTION

QUANTITY TYPE

RATE

THUOHA

MANIFEST # 01001 0767

P.O. # F62269C

CB63 55 GALLON DRUMS

C864 55 GALLON DRUMS

8.34 % SPEC, GRAV. 1.089 =

9.082 X % CL 25.03 =

*2.276 X 55 GAL DRUM X 30 DRUMS = $3,755.4 \pm /CL$

CB64 SURCHARGE ON CHLORINATED MAT

CG95 NON-HAZARDOUS WASTE

TRANSPORTATION BY LUD, INC.

35.000 DRUMS

30,000 DRUHS

3.755.400 POUNDS

15,000 DRUMS

200.000 HILES

ben 87

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2000-0404. Expires 7-31-86 1. Generator's US EPA ID No. **UNIFORM HAZARDOUS** Manifest 2. Page Information in the shaded areas 30 Document No. 7 0 D 0 0 C 3 WASTE MANIFEST is required by State law 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number MCDONNELL DOUGLAS CORPORATION - ST. LOUIS 0 1 1 1 0 1 0 1 1 P.O. BOX 516, ST. LOUIS, MISSOURI 63166 B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 5. Transporter 1 Company Name 6. US EPA ID Number C. MO. Transporter's 1D H-1082K, Y, D, O, 8, 8, 4, 3, 8, 8, 1, 7 D. Transporter's Phone LWD, INC. PART 395-8313 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID NONE F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID KYD088438817 LWD, INC. H. Facility's Phone P.O. BOX 327, HWY. 1523 4, 3, 8, 8, 1, (502) 395 - 8313CALVERT CITY, KENTUCKY 11. US DOY Description (Including Proper Shipping Name, Hazard Class, and ID Number) 12. Containers 13. Total Unit I. Waste No Quantity Wt/Vol 4 0 RQ WASTE FLAMMABLE LIQUID, N.O.S. Other (F005, F003, D001) FLAMMABLE LIQUID UN1993 F005 GHZH MO. RQ WASTE ORM-A, M.O.S. Other R (F001, F002) NA1693 FO A MO. 0 McKee R Other MO. Other J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above T06 TO7 FLAMMABLE LIQUID CB63 RQ = 100 LBS. T06 TO CHLORINATED SOLVENT CB64 RQ = 1 LB. 15. Special Handling Instructions and Additional Information "IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY, RETURN TO GENERATOR." KY - 216 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Printed/Typed Name Month Day 201318 THE 17. Transporter 1 Acknowledgement of Receipt of Materials Date Day Printed/Typed Name Signatuke BY 2038 RETAINED 18. Transporter 2 Acknowledgement of Receipt of Materials Date Day Signature Month Printed/Typed Name 19. Discrepancy Indication Space BE FAC COPY MUST TSDF. 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19 Date T Signature Printed/Typed Name Month Day Year THIS (0.1 1.1 EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

1



LWD, INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

63166

HCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 514 ST. LOUIS, HO

DATE:

2/26/87

TERMS:

DUE NET 30

AMOUNT DUE:

DESCRIPTION

	YTITHAUD	TYPE	RATE	TKUOKA
MANIFEST # 01248 0188				
P.O. # F62269C				
C863 55 GALLON DRUMS	14.000	DRUMS	THE DAMES ASSESSED	
0864 55 GALLON DRUMS	20,000	DRUMS		CHARLES IN
C698 HAZARDOUS WASTE	4.000	DRUHS		
maillest * 01001 0784				
CB63 S5 GALLON DRUMS	21.000	DRUMS		
CB64 55 GALLON DRUMS	21.000	DRUMS		
8.34 X SPEC. GRAV, 1.111 =				
9.266\$/GAL X % CL 21.4 =				
1.983≱/ GAL. X 55 GAL DRUM				
X NUCERCHARGE ON CHLORINATED HAT	4,907, 925			1,275/12/15
CB34'S SURCHARGE ON CHLORINATED HAT	4,798.000	POUNDS		CHESCUSIES.
TRANSPORTATION BY LWD, INC.	200.000	HILES		
		•	TOTAL	
	change D	per		
•	change Chery!	mai 8	7	,
		-		

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 13%).

EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

SHIPMENTS

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on effite (12-pitch) typewriter.) Form Approved. OMB No. 2000-0404. Expires 7-31-86 1. Generator's US EPA ID No. **UNIFORM HAZARDOUS** Manifest 2. Page _ Information in the shaded areas 1,0,D,0,0,0,3,1,3,9 .6 10 WASTE MANIFEST is required by State law 3. Generator's Name and Mailing Address Missouri Manifest Document Number 4,8 MCDONNELL DOUGLAS CORPORATION - ST. LOUIS P.O. BOX 516, ST. LOUIS, MISSOURI 63166 B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 5. Transporter 1 Company Name C. MO. Transporter's ID H-1082. 6. US EPA ID Number K, Y, D, O, S, S, 4, 3, 8, 8, 1, D. Transporter's Phone (502) 395-8313 LWD, INC. 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID F. Transporter's Phone NONE 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID LWD, INC. KYD088438817 P.O. BOX 327, HIGHWAY 1523 H. Facility's Phone 0 8 8 14 CALVERT CITY, KENTUCKY 42029 (502) 395-8313 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number 12. Containers Total t. Waste No Quantity Wt/Vol 0 RQ WASTE FLAMMABLE LIQUID, N.O.S. Other FLAMMABLE LIQUID UN1993 (F005, F003, D001) G E N PO WASTE ORM-A, N.O.S. Other F001 R NA1.693 (F001, F002) ORM-A A MO 0 R Other MO Other J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above Flammable Solvent CB63 RO = 100 lbs Chlorinated Solvent C864, CR98 RO = 100 1bs 15. Special Handling Instructions and Additional Information "IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY, RETURN TO GENERATOR." 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Day Printed/Typed Name Signature Date 17. Transporter 1 Acknowledgement of Receipt of Materials Day Printed/Typed Name Signature 22124187 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19: Date Day Year Signature Printed/Typed Name 251 Amos H. Shelton Jr.

BY THE GENERATOR AFTER ITS RETURN FROM GENERATOR FINAL COPY

BE RETAINED

MUST

THIS COPY I

- PART

EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program.

P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPON U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

5-17-15-62

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on elite (12-pitch) typewriter.) Form Approved, OMB No. 2000-0404, Expires 7-31-86 Manifest Document No. 1. Generator's US EPA ID No Information in the shaded areas UNIFORM HAZARDOUS MOD0008189.6 WASTE MANIFEST is required by State law 3. Generator's Name and Mailing Address A Missouri Manifest Document Number MCDONNELL DOUGLAS CORPORATION - ST. LOUIS 0 11 10 10 0 P.O. BOX 516, ST. LOUIS, MISSOURI 63166 B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 5. Transporter 1 Company Name 6. US EPA ID Number C. MO. Transporter's ID H-1082 K,Y,D,0,8,8 3 8 8 1 LWD. INC. D. Transporter's Phone 395-8313 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID NONE F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID LWD. INC. KVD088438817 P.O. BOX 327, HIGHWAY 1523 H. Facility's Phone (502) 395-8313 CALVERT CITY, KENTUCKY 42029 K,Y,D,0,8,8,4,3,8,8,1,7 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) -14. Unit I. Waste No Total 0 4 RQ WASTE FLAMMABLE LIQUID, N.O.S. Othe G FLANMABLE LIQUID UN1993 (F005. F003 D001 E b. MO N 0 ER RO WASTE BRM-A, N.O.S. Other 1.9.8 NA1693 (F001 F00 A 0 R Other MO. Other J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above Flammable Solvent CB63 RQ = 100 lbs. Chlorinated Solvent CB64, CG98 RQ = 100 lbs. 15. Special Handling Instructions and Additional Information "IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY, RETURN TO GENERATOR. KY-217 16. GENERATOR'S CERTIFICATION: Hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree! have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment Signature 24 17. Transporter 1 Acknowledgement of Receipt of Materials Date Day Printed/Typed Name Signature Month 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Signature Month Day 19. Discrepancy Indication Space AC 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date 25 Day Printed/Typed Name Signature Amos H. Shelton Jr.

CORY S



LWD, INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

63156

DATE:

3/11/37

TERMS:

DUE NET 30

AMOUNT DUE:

)ESCRIPTION

QUANTITY TYPE

RATE

THUOHA

MANIFEST # 01001 0799 P.O. # E62269C CRAS - 55 GALLOW DRUMS

P. O. BOX 516

ST. LOUIS, HO

NANIFEST # 01248 0191 CB63 55 GALLON DRUNS

55 GALLOW DRUMS

8.34 X SPEC. GRAV. 1.205 =

10.049#/GAL, X % CL 15.22 = 71.529\$/GAL. X 55 GAL. DRUH

Ř 15 DRUHS = 1,261.425€ CL

C B 6 4

MCDONNELL DOUGLAS CORPORATION

ACCOUNTS PAYABLE DEPT. 042

SURCHARGE ON CHLORINATED MAT 1,261,425 POUNDS TRANSPORTATION BY LUD, INC. 1.000 TRIPS

. 42.000 DRUHS

22.000 BRUHS

15.000 DRUMS

TOTAL

ber 87 26 mar

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).

SEPARATE SHEET.
THIS DOCUMENT MUST BE USED
FOR ALL MISSOURI-DESTINED
SHIPMENTS

Please print or type (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS

WASTE MANIFEST

3. Generator's Name and Mailing Address

EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality

Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

HAZARDOUS WASTE MANIFEST

Manifes

Document No.

2. Page

1. Generator's US EPA ID No.

M O D O O O 8 1 8 9 5

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT OF NATURAL RESOURCES
314-634-2436

Form Approved. OMB No. 2000-0404. Expires 7-31-86

is required by State law

A. Missouri Manifest Document Number

Information in the shaded areas

RETURN FROM GENERATOR FINAL COPY — PART

0,1,0,0,1 MCDONNELL DOUGLAS CORPORATION - ST. LOUIS P.O. BOX 516, ST. LOUIS, MISSOURI B. State Generator's ID - other 63166 4. Generator's Phone (314) 232-3319 5. Transporter 1 Company Name 6. US EPA ID Number H - 1082C. MO. Transporter's ID KIYIDI 01818141318181 D. Transporter's Phone (502) 395-8313 INC. LIND 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID F. Transporter's Phone NONE 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID LWD, INC. KYD088438817 P.O. BOX 327, HIGHWAY 1523 H. Facility's Phone CALVERT CITY, KENTUCKY 42029 (502) 395-8313 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 12. Containers 14. Unit 13. J. Waste No. Total Wt/Vol Quantity MO RW WASTE FLAMMABLE LIQUID, N.O.S. UN1993 (F005, F003, D001) FLAMMABLE LIQUID דחחח N 0 RO WASTE CRM-A. N.O.S. F001 0,00 H 0,0,0,0,0 (F001. F002 MO 0 R Other MO. J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above TO7 Flammable Liquid CB63 RO = 100 1bs TO6 Chlorinated Solvent CB64 RO = 1 lb 15. Special Handling Instructions and Additional Information "IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY, RETURN TO GENERATOR." KY-219 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Month Day Year ODFLL MECOLLOUGH 3110187 17. Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name Month Day Year 3105 PUC-R 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19 Date Printed/Typed Name Day Amos H. Shelton Jr. 111

OPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN F

HIS COPY MUST BE HE TSDF.

EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

EMERGENCY RESPONSE
U.S. COAST GUARD
1.800-424-8802
CHEM TREC
1.800-424-9300
DEPT. OF NATURAL RESOURCES
314-634-2436

HAZARDOUS WASTE MANIFEST

ease print or type (Form designed to use on elite (12-pitch)	typewriter.)			Form	Approved. Of	/B No. 20	00-0404. Expires 7-31-86
UNIFORM HAZARDOUS	1. Generator's US EPA ID No).	Manifest	2. Page	Informa	ation in	the shaded areas
WASTE MANIFEST	M 0 D0 0 0 0 8	1.8.9.0.51	Document No.	of	is requ	ired by S	State law.
3. Generator's Name and Mailing Address				A. Missouri Ma	nifest Docum	nent Num	ber
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	And the second s			B. State Gener			house the same
P.O. BOX 516, ST. LOUIS, 4. Generator's Phone (314) 232-3319	WISSOUT OFF	00					
5. Transporter 1 Company Name	6 115 5	PA ID Number		C NO T	- Jan 10 -		•
				C. MO. Transp	The same of the sa		The safety of th
TWD, INC. 7. Transporter 2 Company Name		D 10 18 18 14 13	18181717	D. Transporter		502)	395-8313
7. Transporter 2 Company Name	8. US 8	PA ID Number	-	E. MO. Transp	- Lace of the control of the		
NONE				F. Transporter's	Committee on the contract of		
9. Designated Facility Name and Site Address	10. US	EPA ID Number		G. State Facilit	y's ID	4.7	
LWD, INC.	2				0088438	817	
P.O. BOX 327, HIGHWAY 152		D O O O / 7	0 0 1 7	H. Facility's Ph	one		
CALVERT CITY, KENTUCKY 4	- Jone Comme		001/	(51	12) 39	1-831	3
11. US DOT Description (Including Proper Shipping Name	, Hazard Class, and ID Number	er)	12. Containe	ers	13. Total	14. Unit	I. Waste No.
				C	uantity	Wt/Vol.	
a.	*						MO 4 3
RQ WASTE FLAMMABLE LIQUID							Other
FLAMMABLE LIQUID UN199	3 (F005, F0	003, D001)	10,2,2	DM 0,9	182,3	P	D001
b							MO.
RQ WASTE ORM-A, N.O.S.		92					0 4 1.1 Other
ORM-A NA1693 (F001,	F002)		015	DM 0,6	6,9,7	P	F001
C. 272.22.03.3							MO.
	N.	B	McKe				
			CVE	e			Other
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			.				Other .
J. Additional Descriptions for Materials Listed Above			N 1	K. Handling Co	des to Mesh	Time in	
J. Additional Descriptions for Materials Listed Above				K. Handling Co	The second second	See See See	Above
Flammable Liquid CB63 RC	= 100 lbs.			T06	ro7	1 - 1	217 A (18)
Chlorinated Solvent CB64	RQ = 1.1b.	4.5.24	1	T06 /	T07	- 1	
C.				色色符件	學的特		3134-131
d significant state of the stat				4 1 1			
15. Special Handling Instructions and Additional Informati	DESTGNATED TSI	PACILITY.	RETURN T	O GENER	LTOR."		
KY-220		, , , , , , , , , , , , , , , , , , , ,					
K1-220							
16. GENERATOR'S CERTIFICATION: I hereby declare that	the contents of this consignme	nt are fully and accurately	described above b	v proper shippin	g name and a	re classifi	ed, packed, marked, and
labeled, and are in all respects in proper condition for t	ansport by highway according	g to applicable internation	onal and national g	overnment regu	lations and a	pplicable	state regulations.
Unless I am a small quantity generator who has been exe have a program in place to reduce the volume and toxici							
or disposal currently available to me which minimizes t				THE RESERVE OF THE PARTY OF THE	CHICLE!	THE PARTY OF	
Printed/Typed Name	是我的一样。这个	Signature	CP DI	1			Month Day Year
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17. Transporter 1 Acknowledgement of Receipt of Material	THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER, THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER, T	2. 计算机 电影 电影	a per la resulta de la companya de l	20	or the Court	na sa	Date Off
Printed/Typed Name		Signature		1 -		78 7	Month Day Year
13RIKE INITER		7511	111/-			de Pear	03 4080
18. Transporter 2 Acknowledgement of Receipt of Material	s 4	1 200		70			Date
Printed/Typed Name		Signature		Garage Contract	etria reiser	FF 75	Month Day Year
						1	
19. Discrepancy Indication Space					Acceptance .		
is assepting indication opace		27年12年14章25	4 4 7 2 2 4 4	建岩地区			
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		Note of the second				12. A.	
20. Facility Owner or Operator: Certification of receipt of h	azardous materials covered by	this manifest except as	noted in Item 19.			- 40	
	Mr. Barristine	//	11 0	>			Date
Printed/Typed Name	3	Signature	111	111	1//		Month Day Year
Amos H. Shelton Jr.		MOUNT	14/1/10	1 18011	11/5	91	03 11 87

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TSDF.





P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029
Please Remit To:

63165

LWD Inc. P. O. Box 1440 Paducah, KY 42002-1400

DATE:

TERMS:

DUE NET 30

AMOUNT DUE:

HCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, HO

DESCRIPTION

	*	YTITHAUD	TYPE	RATE	AHOUNT
	MANIFEST # 01001 0806				
	P.O. # F622690				
	CB63 55 GALLON DRUMS	32.000	DRUMS		
•	C864 55 GALLON DRUMS	24.000	DRUMS		
	danifest # 01248 0193			,	
	CB63 55 GALLON DRUNS	10.000	DRUHS		
	CB64 55 GALLON DRUNS		DRUMS		
	CB65 55 GALLON DRUHS	1.000	DRUHS		
	8.34 X SPEC, GRAV, 1.158 =				
	9.658#/GAL, X % CL 13.57 =	, X			
-	7.311#/GAL, X 55 GAL, DRUH				
	X 31 DRUHS = 2,235.255 € CL				
	C864 SURCHARGE ON CHLORINATED HAT	T 2.235.255	POUNDS		
	TRANSPORTATION BY LWD, INC.		TRIPS		
				TOTAL	
					and the control of th

PLEASE SEND A COPY OF INVOICE(S) WITH PATHENT

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF OHE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

INSTRUCTIONS FOR THE COM-

PLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

Mckee

U.S. COAST GUARD 1-800-424-8802

CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

GENERATOR FINAL COPY

HAZARDOUS WASTE MANIFEST

UNIFORM HAZARDOUS	h) typewriter.) 1. Generator's US EPA ID No.	Manifest	2. Page		No. 2000-0404. Expires 7-31 on in the shaded areas																		
WASTE MANIFEST	M,0,D,0,0,0,8,1,8,9,6	3 0 0 8 0	of	is require	d by State law.																		
3. Generator's Name and Mailing Address		 	A. Missouri	lanifast Documer	nt Number																		
MCDONNELL DOUGLAS CORPO	DRATION - ST. LOUIS		0 1	001	0 8 0																		
P.O. BOX 516, ST. LOUIS		*	B. State Gen	erator's ID - othe	CONTRACTOR OF THE PROPERTY OF																		
4. Generator's Phone (314) 232-3319	180-																						
Transporter 1 Company Name	6. US EPA ID Number	100	C. MO. Trans	porter's ID H	-1082																		
LWD. INC.	K Y D O 8 8	43881	D. Transporte	r's Phone	502) 395-8313																		
7. Transporter 2 Company Name	8. US EPA ID Number		E. MO. Trans	Plant Associated Visiting a service and a service of the service o																			
NONE	LIIII		F. Transporte	r's Phone	THE PROPERTY !																		
9. Designated Facility Name and Site Address	10. US EPA ID Number		G. State Faci	lity's ID																			
LWD, INC.			K	TD0884388	317																		
P.O. BOX 327, HIGHWAY 1		1 2:0 0 1	H. Facility's	hone																			
CALVERT CITY, KENTUCKY		4 3 8 8 1	1:00	502) 395-	-8313																		
11. US DOT Description (Including Proper Shipping Nam	ne, Hazard Class, and ID Number)	12. Contain	ners	13. Total	14. Unit 1. Waste No.																		
		1			t/Vol.																		
4					MO.																		
	LE LIQUID, N.O.S.	1022	D 34 1	1100	Other																		
	993 (D001, F005, F003) 0,3,2	D _M	10011	D001																		
).		2211			MO																		
RQ=1 WASTE ORM-A, N.O		024	DM/	2/11	P FOO1																		
ORM-A NA1693 (F001,	, F902)	07270	17 14 (101711	MO.																		
	7	7																					
	4	1			Other																		
					MO																		
	7 - 2		.																				
		1			Other:																		
Additional Descriptions for Materials Listed Above			K. Handling (odes for Wastes I	isted Above																		
		or Angelon S.	то6	T07																			
Flormable Liquid CB6	1 043		T06																				
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THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TSDF.

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality

Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

B McKee

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300
DEPT. OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

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63166

P.O. BOX 327 - CALVERT CITY, KENTUCKY 4202256 Remit To:

LWD Inc. P. O. Box 1440 Paducah, KY 42002-1400

4/03/87

DATE:

TERMS:

DUE NET 30

AMOUNT DUE:

ESCRIPTION

MANIFEST # 01248 0196 P. D. # F62269C CB63 55 GALLON DRUMS MANIFEST # 01001 0814 P 0 # FA77690 55 GALLON DRUMS

P. O. BOX 516

ST. LOUIS, NO

MCDONNELL DOUGLAS CORPORATION

ACCOUNTS PAYABLE BEPT, 042

YTITHAUG TYPE RATE

TOTAL

AHOUNT

14,000 DRUMS

66.000 DRUHS

PLEASE SEND A COPY OF INVOICE(S) WITH PATHENT

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE. 18%).



P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

63166

Please Remit To: LV/D inc. P. G. Box 1440 Paducah, KY 42002-1400

HCOONNELL BOUGLAS CORPORATION ACCOUNTS PAYABLE BEPT. 042 P. O. BOX 516 ST. LOUIS, NO

DATE:

4/03/87

TERMS:

DUE HET 30

AMOUNT DUE:

DESCRIPTION

QUANTITY TYPE

RATE

AHOUNT

L W D. INC.

MANIFEST # 01248 0126

P.O. # E62269C

C863 55 GALLON DRUNS

MANIFEST # 01001 0814

P.O. # E62262C

C863 55 GALLON DRUNS

14.000 DRUMS

L U D TRUCKING, INC.
TRANSFORTATION BY LUD, INC.

64.000 DRUHS

TOTAL FOR L U 0, INC.

1.000 TRIPS

JOTAL FOR L U D TRUCKING, INC

GRAND TOTAL



THIS IS A CONSOLIDATED STATEMENT OF ALL I. 4 D SUBSTDIARIES

PLEASE SEND A COPY OF INVOICE(S) WITH PACHENT.

only

Gans.

ben

01 Jul 87

IF NOT PAID WITHIN 20 DAYS FROM REGEIPT, A CARRYING CHARGE OF ONE & GNE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 10%).

NSTRUCTIONS FOR THE COMPLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241 EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCES
314-634-2436

HAZARDOUS WASTE MANIFEST

	ease print or type (Form designed '17 use on elite (12-pitch) typewriter.)			Fo	rm Approved. C	MB NO. 20	000-0404. Expires 7-31-86
A		tor's US EPA ID No.	Manifest Document No.	2. Page	1 Inform	nation in	the shaded areas
29	WASTE MANIFEST MODEL OF DESCRIPTION	0,0,0,0,3,1,8,9,0,6,6	10119	of	is requ	uired by	State law.
П	3. Generator a Name and Mailing Address			A Missouri	Manifest Docu	ment Nun	nher
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П	P.O. BOX 516, ST. LOUIS, MISSO	JOKT 02T20		B. State Ge	enerator's ID -		
	4. Generator's Phone (314) 232-3319				0199	3	
1	5. Transporter 1 Company Name	6. US EPA ID Number		C. MO. Tra	nsporter's ID		Company of the second second
	LMD. INC.	K Y D Q 3 3 4 3	831		rter's Phone	7507	92) 395-8313
	7. Transporter 2 Company Name	8. US EPA ID Number			All Control	(302	Water and the second se
		6. US EFA ID Number			nsporter's ID	32-75	AND THE PERSON NAMED IN COLUMN
	NONE			F. Transpor	ter's Phone		
	Designated Facility Name and Site Address	10. US EPA ID Number		G. State Fa	cility's ID		Hammar Strate
1	LWD, INC.			K	YD08843	3317	
	P.O. BOX 327, HWY. 1523		, in	H. Facility's		est at the sale	Andrew Lake
		KIYIDIO18181413	0. 0. 1. 7	,	502) 39	5 001	
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GENERATOR FINAL COPY - PART 2

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TSDF.

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802

CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

GENERATOR FINAL COPY - PART 2

Plea	ase print or type (Form designed for use on elite (12-pitch)	typewriter.)			Form	Approved. O	MB No. 2	000-6404. Expires 7-31-86
A	UNIFORM HAZARDOUS	1. Generator's US E	PA ID No.	Manifest Document No.	2. Page	_ Inform	ation in	the sinaded areas
Fig.	WASTE MANIFEST	0,0,0,0	0,3,1,8,9,6,3	0,0,1,4	of	_ is requ	ired by	State law.
	3. Generator's Name and Mailing Address				A. Missouri M	anifest Docu	ment Nu	mber 10 10 10 10 10 10 10 10 10 10 10 10 10
	MCDONNELL DOUGLAS CORPORA	TTON _ CT	TOTITE		0 1	0,0,	1	0, 8, 1, 4
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	P.O. BOX 516, ST. LOUIS,	MISSOURI	63100		II. STAN HELLE		uner	PARTIES TO THE
	4. Generator's Phone (. 314) 232-3319					001		A CROSS STATE
	5. Transporter 1 Company Name		6. US EPA ID Number		C. MO. Trans	porter's ID	H-10	82
	IND. INC.		KIVIDIO1818141	31 31 81 11 7	D. Transporte	r's Phone	(502	395-8313
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	9. Designated Facility Name and Site Address		10. US EPA ID Number		G. State Facil			
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-	LND, INC.					088438	817	
	P.O. BOX 327, HWY. 1523				H. Facility's P	hone		
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G E	FLARMABLE LIQUID UN199	13 (F00	5, F003, D001)	Sampanin	12 XL	111/10		D001
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	d.	•						MO.
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	J. Additional Descriptions for Materials Listed Above			1389 FET 120	K. Handling C	odes for Wast	es Listed	Above
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	Flammable Solvent CB63	The second second second			LUQ .	110//		
						1-1-1		
1	C				1-1-1		Mary 1	
	d						See All	
-	15. Special Handling Instructions and Additional Informati	on						
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1	KY-223							
1	16. GENERATOR'S CERTIFICATION: I hereby declare that							
	labeled, and are in all respects in proper condition for t Unless I am a small quantity generator who has been exe							
1	have a program in place to reduce the volume and toxici	ty of waste generated	to the degree I have determined	to be economically p	practicable and	I have selected	the met	nod of treatment, storage,
1	or disposal currently available to me which minimizes to	he present and future		e environment.	A		, <u>*</u> . =	0 2 2 1 1
1	Printed/Typed Name		Signature	11	11.			Month Day Year
A	JOHN SKARIN		10	then I	than	-		10,410,/18,71
Т		S	1					Date
TRANSPORTER	Printed/Typed Name		Signature		0 1	·		Month Day Year
N	2	1-)	Market .	7	11 111	/		10401187
P	Roger L Cro	1	1 Agu	1	1			04101101
R	18. Transporter 2 Acknowledgement of Receipt of Material	S	10:					Date Vasa
T	Printed/Typed Name		Signature					Month Day Year
Ř		r rigitar ta						
7127	19. Discrepancy Indication Space							
F		water that						* *
Α								
C								
L	20. Facility Owner or Operator: Certification of receipt of h	azardous materials c	overed by this manifest except	as noted in Item 19.	2			
1			/					Date
T			Signature	7 7	- 7	,		Month Day Year
Υ	4		110	11/	8.1			1 04 001 371



P.O. BOX 327 - CALVERT CITY, KENTUCKY 42029 LWD Mo.

Please Ramit To: LWD Inc. P. O. Box 1/40 Paducah, KV 42002-1/04

HCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, NO 63166

DATE:

4/27/87

TERMS:

DUE HET 30

AMOUNT DUE:

DESCRIPTION

QUANTITY TYPE

RATE

THUOMA

55.000 DRUHS 25.000 DRUHS



5,810.750 POUNDS 1.000 TRIPS



ber 87

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 OF NATURAL RESOL

INSTRUCTIONS FOR THE COMPLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS

EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

MAZADDOUG WASTE MANUEEST

HIPMENIS.	9)	MAZARDOUS WAS	OIE MAMILES				314-634-2436
ease print or type (F	orm designed for use on elite (12-pi		. 7	Form A	pproved. OM	1B No. 2000-040	4. Expires 7-31-8
UNIFOR	RM HAZARDOUS	Generator's US EPA ID No.	Manifest Document No.	2. Page	Informa	ation in the sh	aded areas
WAS	TE MANIFEST	10000000000000000000000000000000000000		of	is requi	red by State I	aw.
	ne and Mailing Address			A. Missouri Mar	nifest Docum	ent Number	Yan Halfall
MCDON	WELL DOUGLAS CORP	ORATION - ST. LOUIS		0 1 1 1 0	0.1	0.	0. 2.
P.O. 1	BOX 516. ST. LOUI	S. MISSOURI 63166		B. State Genera	7 4	ther	31 41
4. Generator's Pho		*		D. State Genera	1013 10 - 01	ine.	#1794 P.
5. Transporter 1 C		6. US EPA ID Nur	er fann om de en en en en en en en en en en en en en	C. MO. Transpo		1-1082	
LWD,	LNG.	K, Y, D, O, 8	3, 8, 4, 3, 8, 8, 1, 7	D. Transporter's	Phone //	502) 39	5-8313
7. Transporter 2 C	ompany Name	8. US EPA ID Nur	mber	E. MO. Transpo			4225g23941.77
NONE		1	1 1 1 1 1 1 1	F. Transporter's	Phone		
9. Designated Faci	lity Name and Site Address	10. US EPA ID Nu	NAME AND ADDRESS OF THE OWNER, WHEN PERSON AND PARTY OF THE OWNER,	G. State Facility	's ID	Nation Company	En PEUD
LWD,	INC.			KY	D08843	8817	
	BOX 327, HWY. 152	3		H. Facility's Pho			
			01111	2 7 2 7 10 10 10 10 10 10 10 10 10 10 10 10 10		e 0010	
	RT CITY, KENTUCKY	No continue of the same from	3, 8, 4, 3, 8, 8, 1, 7			5-8313	
11. US DOT Descr	iption (Including Proper Shipping N	lame, Hazard Class, and ID Number)	12. Contain		13. Total	14. Unit I	. Waste No.
					uantity	Wt/Vol.	
a.						MO.	
R0=100	WASTE FLARMABL	E LIQUID. N.O.S.				0	1413
		11999 (FOO5, FOO3, I	0001) 9,5,5	DM 7.3	1,4,1	Other DO	01
FLANDI	Will drockly on	, COO3, 10003, 1	70027 1172		7 71 7	MO.	OI.
	THE PROPERTY OF THE PARTY OF TH	0.0				0	1411
	WASTE ORM-A, N.			11/2	519	Other	21246,200
c. ORM-A	NA1693 (F00)1, F002)	0, 2, 5	D 1/10	7111	D F()	01
C.						MO.	
		,2	McKolo		,	Other	
To a second seco		7964					
d.	>					MO.	
						3.470	
						Othe.	
1 Additional Data	riptions for Materials Listed Above			K. Handling Cod	for for Monte	a Listed About	
J. Auditorial Desc	riptions for Materials Listed Above			K. Handling Cot	ies in waste	S LISTED ADOVE	2, 2, 3
a. Flamma	able Liquid CBB3	R0=1001bs.		T06 L	1071	1 1 2 1	
b. Chlor	Inated Solvent C	2864 RO=11b		T06 L	T071		
c.				E iCia	1 1	13970	
d. 342 37 37 37				Strain F			
15. Special Handlin	ng Instructions and Additional Inform	mation		A			
"IF U	NABLE TO DELIVER	TO DESIGNATED TSD FAC	HLITY, RETURN	TO GENER	LATOR.		
KY-22.	5						
16. GENERATOR'S	CERTIFICATION: I hereby declare	that the contents of this consignment are fully a					
		for transport by highway according to applica					
		n exempted by statute or regulation from the du exicity of waste generated to the degree I have o					
		zes the present and future threat to human he		Α .			
Printed/Typed		Signature		1/2	۴	Month	Day Yea
JOH	IN SKARM		Volum -	Har	-	10.4	1248
17. Transporter 1	Acknowledgement of Receipt of Mati	erials	/1				Date
Printed/Typed		Signature	1	//		Month	Day Yea
111	10	4	1		/	10 (17118
17. Transporter 1 / Printed/Typed 18. Transporter 2 / Printed/Typed	VAMAU	UAY	19ml	ventu	val	019	12/10
18. Transporter 2 A	Acknowledgement of Receipt of Mate		• /			-	Date
Printed/Typed	Name	Signature				Month	Day Yea
100000000000000000000000000000000000000				1.2 2 7 7 9			
19. Discrepancy In	dication Space		ATTACH AND A STATE OF THE STATE				Y
130000							
							1.4
1000000				,	-		
20. Facility Owner	or Operator: Certification of receipt	of hazardous materials covered by this manif	est except as noted in Item 19.		_	-	
							Date
Printed/Typed	Name	Signature	- 110.			Month	Day Yea
Printed/Typed	an PcKinney	* 2	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		Teach near	10%	127 117
	water a beat and the beat		and the second second	1 -,	contract?	1	1 1



63166

Please Remit To:

P.O. BOX 327 - CALVERT CITY, KENTUCKY 42029 WD Inc.

P. O. Box 1440

Paducah, KY 42002-1400

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, NO

DATE:

5/18/87

TERMS:

DUE HET 30

AMOUNT DUE:

DESCRIPTION

YTITHAUD	TYPE	RATE	ANOUNT
10.000	DRUNS	CONTRACT.	
23,000	DRUMS		
19,000	DRUMS		
	2112112		
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1.000	18113	TOYAL	
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			OK
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INVOICE(S)	UITH PATE	HEHT :	08 Jun
*******	***	****	
	10.000 23.000 17.000 18.000 1.000 4,164.545 1.000	10.000 DRUMS 26.000 DRUMS 19.000 DRUMS 18.000 DRUMS 1.000 BRUMS 4,164.545 PDUMDS 1.000 TRIPS	10.000 DRUMS 26.000 DRUMS 19.000 DRUMS 18.000 DRUMS 1.000 BRUMS 1.000 BRUMS TOTAL

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF CNE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 13%).

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

HAZARDOUS WASTE MANIFEST

U.S. COAST GUARD 1-800-424-8802
CHEM TREC 1-800-424-9300
DEPT. OF NATURAL RESOURCES 374-634-2436

GENERATOR FINAL COPY - PART 2

Please print or type (Form designed ' r use on e				7			000-0404. Expires 7-31-8
UNIFORM HAZARDOL			Manifest Document No.	2. Page			the shaded areas
WASTE MANIFEST	10000	0081896	5 D 10 18 14 14			-	State law.
Generator's Name and Mailing Address		T 0577 5			Manifest Docur	BG-25783	
MCDONNELL DOUGLAS					0 1 0 1 3	15043	0,8,4,4
P.O. BOX 516, ST. 1 4. Generator's Phone (314) 232-	LOUIS, MISSOURI -3319	63166	use La	V-1844 July 5-800-000	erator's ID - o	iner A	
5. Transporter 1 Company Name		6. US EPA ID Number	-	C. MO. Tran	sporter's ID	H-14	082
IMD INC.		18181010171X	41318181117	D. Transport	er's Phone	(50:	2) 395-8313
7. Transporter 2 Company Name		8. US EPA ID Number		E. MO. Trans	sporter's ID		
TOTE			1 1 1 1 1 1	F. Transporte	er's Phone		
9. Designated Facility Name and Site Address	SS	10. US EPA ID Number		G. State Fac	ility's ID		
LHD, INC.	~			1	YD08843	3881	7
P.O. BOX 327, HWY.	1523			H. Facility's			
CALVERT CITY, KENT	UCKY 42029	K Y D 0 8 8	4,3,8,8,1,7		(502) 39	35_8	313
11. US DOT Description (Including Proper S			12. Contair		13.	14.	
					Total Quantity	Unit Wt/Vol.	I. Waste No.
a.							MO, 4 1
RQ = 1 LB. WASTE	ORM-A. N.O.S.						Other
ORM-A NA1693	(F001, F002)		CILIU	DMA	3,8,4,2	P	FOO1
b.							MO.
RQ = 100 LBS. W	ASTE FLANMABLE	LIOUID. N.O.S.					0 1 4 1 3
FLAMMABLE LIQUID		03, F005, D001		D 24 34.	文田,大学	77	Diner PANA
c.	0112775 (20	00, 1000, 500				-	MO. 93
							1 1 1
	:						Other -
d					1 1 1	and the latest and th	MO. Other
J. Additional Descriptions for Materials Liste	ed Above			K. Handling	Codes for Wast	es Listed	Above
a. Chlorinated Solven	t CBE4	· 1985年1月1日 - 1985年1月1日	alex Delicated to the Control of the	T06	T07	2 2 0	
Flammable Solvent			5. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14	T06	T07	E 13 4	
C. IT The state of the state of		· 在17年2月1日		1.01	村石市		·跨國 可可
d at the second of the second				137 F		是可是	
15. Special Handling Instructions and Additi					m 4 mm an m 11		
"IF UNABLE TO DELI	VER TO DESSENAT	ED_TSD FACILITY	Y, RETURN :	TO GENE	RATUR.		
KY-225 LAB SAM	PLE NUMBER: 44	(>		5 6			
16. GENERATOR'S CERTIFICATION: Theret			TATE 7 BY IT			re classi	fied packed marked an
labeled, and are in all respects in proper							
Unless I am a small quantity generator wh have a program in place to reduce the volu or disposal currently available to me which	ume and toxicity of waste general	ed to the degree I have determ	ned to be economically				
Printed/Typed Name	NO BOOKE A S	Signature	1 2 2 2 1	1 2 1 2	-		Month Day Yea
ANNETTE C.	SCHUETZ		1×1-6.	All	ut		104/3/2
17. Transporter 1 Acknowledgement of Rece	The same of the sa				3		Date
Printed/Typed Name	5.5. 5. Materials	Signature					Month Day Yea
1/200 A - 1	Int of		1.0	o. A			10511 78°
KIMER HUR	pint of Motorials	1124	W THE	MA			Date
18. Transporter 2 Acknowledgement of Rece Printed/Typed Name	eipt of iviaterials	Signature	V	¥			Month Day Yea
							1 . 1 . 1
10 Discrepancy Indication Space							
19. Discrepancy Indication Space							
							× .
20. Facility Owner or Operator: Certification	of receipt of hazardous materials	s covered by this manifest exc	ept as noted in Item 19.				
							Date
Printed/Typed Name	, 1	Signature	111	1			Month Day Year
Tean Tolling	e 7		. / / / /				1 5 La 1 2

EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCES
314-634-2436

HAZARDOUS WASTE MANIFEST

print or type (Form designed for use on elite (12-pite UNIFORM HAZARDOUS	ch) typewriter.) 1. Generator's US EPA ID No.		Manifest	2. Page			the shaded areas
WASTE MANIFEST	55000000	1 9 0 0 6 6	ocument No.	of _	is requ	ired by	State law.
. Generator's Name and Mailing Address		- 13 13 13 13 13 1	0 3 3 3	-	ouri Manifest Docu	-	
MCDONNELL DOUGLAS CORPOR	RATTON - ST. LOUI	TS		The street in	All the second as a second as	100000000	
P.O. BOX 516, ST. LOUIS				-	1 2 4 1	R-MANUFACTURE CO.	0,1,9,9
			en e i	B. State	Generator's ID - o	ther	
Generator's Phone (314) 232-331	9				01248		
Transporter 1 Company Name		A ID Number		C. MO.	Transporter's ID	1-10	32
LWD, INC.	K Y I	008843	8 8 1 7	-		-	395-8313
Transporter 2 Company Name		A ID Number			Transporter's ID	All Michael	, 373-3323
NONE	1				sporter's Phone	Park Care	
Designated Facility Name and Site Address		PA ID Number		and the second	Facility's ID		THE RESERVE OF THE PARTY OF THE PARTY.
	10. 03 E	FA ID Nulliber		G. State	e raciity's 1D	Hall W	
LWD, INC.					KYD088438	817	
P.O. BOX 327, HWY. 1523				- N. W. H. G.	ity's Phone	y	
CALVERT CITY, KENTUCKY	42029 K,Y,	D ₁ 0 ₁ 8 ₁ 8 ₁ 4 ₁ 3 ₁	8, 8, 1, 7		(502) 395	831	3
. US DOT Description (Including Proper Shipping Na	ame, Hazard Class, and ID Number))	12. Contain	ers	13.	14.	200 - 200 Cont 100 S
					Total Quantity	Unit Wt/Vol.	1. Waste No.
			_		Quantity	100001.	MO.
							01/17
RQ = 1 LB. WASTE ORM						1 -	Other
ORM-A NA1693 (F00	1, F002)		1719	MG	018 7 7 8	P	.F001
							INO.
RO = 100 LBS. WASTE	FT.AMMABLE LIQUID	. N.O.S.					0 4 3
PLAMMABLE LIQUID UN1			1, 1,2	D M	13,3,3,8	P	F003
BLANMADIN HIOUID GHI	555 (1005, 10	95,25027				-	MO.
							0 1 4 1 4
HAZARDOUS WASTE, LIQUID	, N.O.S.	*		40	111 -		Other .
OPM-X MAGISO			DIGIT	J 134	1014/6/3	I P	N/A
							MO.
						1	Other •
							Office
Additional Descriptions for Materials Listed Above *				K. Hand	iling Codes for Wast	es Listed	Above
						7	
Chlorinated Solvent CB				TOG		5	
Flammable Solvent CB63				TOE	TO7		
Waste 011 CE65 (not a	federally regul	ated waste)		TO6	TO7	# X.6	
					2 F X 15 F Z 10		
. Special Handling Instructions and Additional Inform							
"IF UNABLE TO DELIVER T	O DESIGNATED TSD	FACILITY, I	RETURN I	O GE	INERATOR."		
KY-227 LAB SAMP	LE NUMBER: 496	9 3					
	CDAUTIN. 1.09	(001100)	CAE a BA	7 777	. 0.01		
GENERATOR'S CERTIFICATION: Thereby declared labeled, and are in all respects in proper condition for							
Unless I am a small quantity generator who has been							
have a program in place to reduce the volume and to	xicity of waste generated to the degree	ee I have determined to be	economically				
or disposal currently available to me which minimize	as the present and future threat to h	numan health and the env	ironment.				
Printed/Typed Name	5	Signature					Month Day Year
ANNETTE (S	HUFTZ 1	() / /	16. 2	Der	louist.	*,	0,5/13/87
Transporter 1 Acknowledgement of Receipt of Mate		7/			5		Date
Printed/Typed Name		Signature	1			-	Month Day Year
1/20 dl = 22	t d	11.	1.	_			100 DIE
wyer yyakpi	M 9	K Oyu	ange	_			OP NIZION
Transporter 2 Acknowledgement of Receipt of Mate		1	1			-	Date
Printed/Typed Name	S	Signature			1-0-6		Month Day Year
						and y	
Discrepancy Indication Space					At any		errorente com franzonia sondanos de la companio
	the second of the second		and the contract of the contra				
Facility Owner or Operator: Certification of receipt	of hazardous materials covered by t	this manifest except as no	oted in Item 19				
Facility Owner or Operator: Certification of receipt	of hazardous materials covered by t	this manifest except as no	oted in Item 19.	-			Data
			oted in Item 19.				Date Month Day Year
Printed/Typed Name		this manifest except as no	oted in Item 19.	7-			Date Month Day Year



P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

63166

Please Remit To: LWD, Inc. P. O. Box 1440 Paducah, KY 42002-1400

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. 0. 80% 516 ST. LOUIS, NO

DATE:

3/11/87

TERMS:

DUE HET 30

AMOUNT DUE:

OUNT DUE:

DESCRIPTION

919.05# EL

QUANTITY TYPE RATE THUUMA L W D. INC. HANIFEST # 01248 0205 P.O. # F74985C CB53 55 GALLON DRUMS 30.000 DRUMS HANIFEST # 01001 9866 55 GALLON DRUMS 13,000 DRUMS CG79 55 GALLON DRUMS 2.000 DRUHS 55 GALLOH DRUMS 35.000 DRUHS CB33 8.34 X SPEC. GRAV. 0.987 = 8.232#/GAL, X % CL 13.53 = 1.114 X 55 GAL, DRUM X 15 DRUMS =

L U O TRUCKING, INC.
TRANSPORTATION BY LUD, INC.

CB64 SURCHARGE ON CHLORINATED MAT

919.050 FOUNDS TOTAL FOR L W D, INC.

1.000 TRIPS
TOTAL FOR L U D TRUCKING, INC

GRAND TOTAL

len 02 Jul 87

THIS IS A CONSOLIDATED STATEMENT OF ALL L U O SUBSIDIARIES

PLEASE SEND A COPY OF INVOICE(S) WITH PAYMENT.

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED

HIPMENTS.	HAZARDOUS WAS	IE MANIFES	51	314-634-2436
ease print or type (Form designed for use on elite (12-			Form Approved. O	MB No. 2000-0404. Expires 7-31-86
UNIFORM HAZARDOUS	1. Generator's US EPA ID No.	Manifest Document No.	2. Page Inform	nation in the shaded areas
WASTE MANIFEST	10000003133	0 6 D 0 Z 0 5	of is requ	uired by State law.
Generator's Name and Mailing Address		11.8	A. Missouri Manifest Docu	ELECTRICAL TO A STATE OF THE ST
MCDONNELL DOUGLAS CORP			0 1 2 4	8 2 0 2 0 5
P.O. BOX 516, ST. LOUIS			B. State Generator's ID -	other
4. Generator's Phone (314) 232-331	9	1 12	01248	11 1000
5. Transporter 1 Company Name	6: US EPA ID Num	nber	C. MO. Transporter's ID	- XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
LWD. INC.	K 17 10 10 18	18141318181117	D. Transporter's Phone (502) 395-8313
7. Transporter 2 Company Name	8. US EPA ID Num		E. MO. Transporter's ID	
NONE			F. Transporter's Phone	
9. Designated Facility Name and Site Address	10. US EPA ID Nu	imber	G. State Facility's ID	
LWD, INC.			KYD08843	8817
P.O. BOX 327, HIGHWAY			H. Facility's Phone	
CALVERT CKTY, KENTUCKY	42029 KYD08	8 4 3 8 8 1 7	(502) 39	5_9313
11. US DOT Description (Including Proper Shipping		12. Contain	ners 13.	14.
			Total Quantity	Unit I. Waste No.
a.				MO.
RQ WASTE FLAMMABLE LIQ	UID, N.O.S.		~	0 6 1 3
FLANMABLE LIQUID UN	1993 (F005, F003, D	001) 0,3,0	D. MILA3610	P Other
b.				MO STATE OF THE ST
	12		1.1	Other
C.	S Mckrs			MO.
	Ę.			
				Other
d.				MO.
				1
				Other
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Was	tes Listed Above
				Last Victoria
a Flammable Liquid CB63	_ RQ = 100 1D8.		T06 T07	
15. Special Handling Instructions and Additional Info	ormation	**************************************		
"IF UNABLE TOODELIVER	TO DESIGNATED TSD FACI	LITY, RETURN	O GENERATOR."	
KY-229	*			
 GENERATOR'S CERTIFICATION: I hereby declar labeled, and are in all respects in proper condition 				
Unless I am a small quantity generator who has be		, ,		
have a program in place to reduce the volume and or disposal currently available to me which minim			practicable and I have selecte	d the method of treatment, storage,
Printed/Typed Name	Signature	and the environment.	36.68	Month Day Year
1115 CSC	11115-		11.5	10/10/010-
17. Transporter 1 Acknowledgement of Receipt of M	THE VAL	nea : e	3	Date
Printed/Typed Name	Signature	1		Month Day Year
11 180 1		10 01 Ba	1-1	1 20087
-1040 Devell		wy I was	fille	19 (18 01)
 Transporter 2 Acknowledgement of Receipt of M Printed/Typed Name 	aterials			Month Day Year
r linted/Typed Name	Signature			Monut Day Tear
				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
19. Discrepancy Indication Space				
20. Facility Owner or Operator: Certification of recei	pt of hazardous materials covered by this manife	est except as noted in Item 19.		
	1	1 1 1 1		Date

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Day

Printed/Typed Name

SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802

MERER

HAZARDOUS WASTE MANIFEST

CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

	MINDOOD WAS I	P 1411-71411 P			No. 2000 0101 =	mino 7.01.00
uniform HAZARDOUS 1. G	enerator's US EPA ID No	Manifest Document No.	2 Page		No. 2000-0404. Ex on in the shade	
WASTE MANIFEST	0000031890	6 3 10 0 8 5 1	5 of	is require	d by State law.	
3. Generator's Name and Mailing Address			A. Missouri Man	ifest Documer	The second secon	1000
MCDONNELL DOUGLAS CORPORATIO	ON - ST. LOUIS		0,1,0	0,1	0 8	,6 ,6
P.O. BOX 516, ST. LOUIS, MI	SSOURI 63166		B. State General	or's ID - othe	r -	
Generator's Phone (314) 232–3319			0	1001		
5. Transporter 1 Company Name	6. US EPA ID Numbe	er .	C. MO. Transpo		1082	
					02) 395-	0212
LWD, INC.	8. US EPA ID Numbe	8 4 3 8 8 1			102) 393-	0313
7. Transporter 2 Company Name	8. US EPA ID Numbe	er	E. MO. Transpor	No. of the last of		1 1 1 1 1 1 1 1
NOVE			F. Transporter's	1000		
9. Designated Facility Name and Site Address	10. US EPA ID Numb	per	G. State Facility	s ID		9.5
LWD, ING.			KY	D088438	817	
P.O. BOX 327, HIGHWAY 1523		0 / 0 0 0 1	H. Facility's Pho	ne	A. The Artist	
CALVERT CITY, KENTUCKY 420	\mathbb{Z}_{2}	3 4 3 8 8 1	(5	02) 395	-8313	
11. US DOT Description (Including Proper Shipping Name, Haz	ard Class, and ID Number)	12. Contai			14.	
					Unit I. Wa t/Vol.	ste No.
a.		013			MO.	
RO WASTE ROM-A, N.O.S.		1		, , , , , , , , , , , , , , , , , , ,	0 14	3 1 1 3
ORM-A NA1693 (F001, F	302)		DM 0.5	3,4,3	P Other	
b.			1 0 -	2 1 25	F001	
RO WASTE FLAMMABLE LIQUID,	N.O.S. (F002, D0	02) 00			0 16	11
	KINHKINEMAKUMA			332	D Other	
c.	Andrew Carrier Car	130	44 11101	(3 100) 120	MO.	
		2 2		× .	ก	1.0
RQ WASTE FLAMMABLE LIQUID,		211	· · ·	- 0 -	Other	
	(F005, F003, D0	01) 03,3	134 14	3185	P n001	
d.					MO.	
, , , , , , , , , , , , , , , , , , , ,		1			Other	2 3 4 4 4 4 4 4 4
	-	1 1		1 1	Table 150	
J. Additional Descriptions for Materials Listed Above			K. Handling Cod	es for Wastes I	Listed Above 🖟 🖟	5年,2008
* Chlorinated Solvent CB64	RO=1 1b.	5. 重新的 经通过等	T06	T07	75878	
Chlorinated/Flammable Solve			T06	T07	*****	
c Flammable Liquid CB63 RQ			T06	T07	41-73	
d.				164-27-2		
15. Special Handling Instructions and Additional information	and the second control of the second control					
tion the part to her time to he	GICHATED TOD PACTI	ITY RETURN	TO GENERA	TOP II	KY-22	2
"IF UNABLE TO DELIVER TO DE			fic Gravi		252 404	
Lab Sample No.:4995 Chlo						
 GENERATOR'S CERTIFICATION: I hereby declare that the co- labeled, and are in all respects in proper condition for transp 						
Unless I am a small quantity generator who has been exempte						
have a program in place to reduce the volume and toxicity of w or disposal currently available to me which minimizes the pre	raste generated to the degree I have dete	ermined to be economically				
Printed/Typed Name	Signature	and the environment.	•	- 14,	Month	Day Year
Ausens Colles	T	to 1	A-line	f-"	10/1	0000
MNETTE SCHUL		au .	gerra	3	- जिल	16101
17. Transporter 1 Acknowledgement of Receipt of Materials	Signature					Day Year
Printed/Typed Name	Signature	1R			Month	- CIC 7
Lloyd Deve TI	1/0	of De	-elf		100	18 81
18. Transporter 2 Acknowledgement of Receipt of Materials						ate
Printed/Typed Name	Signature				Month	Day Year
		<u> 1914 - 195 - </u>	1.0			
19. Discrepancy Indication Space			1 - A - F			1. 18 P. W.
						T. B.V
						X. 37.
A STANDARD TO AND STANDARD CONTRACTOR					,	
20. Facility Owner or Operator: Certification of receipt of hazard	ous materials covered by this manifest	except as noted in Item 19	l			
		* * *)		Day Year
Printed/Typed Name	Signature	mille the		1	Month 05 C	Day Year
TAND IN DIMENSI OF .				10000	< 1 1	



63166

P.O. BOX 327 - CALVERT CITY, KENTUCKY 42029 Remit To:

LWD, Inc. P. O. Box 1440 Paducah, KY 42002-1400

HCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, MO

DATE:

6/23/87

TERMS:

DUE HET 30

AMOUNT DUE:

DESCRIPTION

QUANTITY TYPE

RATE

THUOMA

L U D. INC. MANIFEST # 01248 0208 P.O. # F749850 0863 55 GALLON DRUHS MANIFEST # 01001 0878 0. # F74935C

20,000 DRUMS

1863 55 GALLON DRUMS

61,000 DRUHS TOTAL FOR L W D. INC.

L U D TRUCKING, INC. TRANSPORTATION BY LWD, INC.

1.000 TRIPS

TOTAL FOR L U O TRUCKING. INC

CRAHD TOTAL

OK 15 Jul 87

THIS IS A CONSOLIDATED STATEMENT OF ALL L U D SUBSIDIAPIL'S

PLEASE SEND A COPY OF INVOICE(S) WITH PAYMENT.

IF NOT PAID WITHIN SO BAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

ase print or type (Form designed the use on elite (12-pitch				Form Approved. Of	MB No. 2	000-0404. Expires 7-31-8
UNIFORM HAZARDOUS	Generator's US EPA ID No	Manifest Document No.	2. Page	Inform	ation in	the shaded areas
WASTE MANIFEST	M, 0, D, 0, 0, 0, 8, 1, 8, 9, 0, 6,	5 3 2 5	of .	is requ	ired by	State law.
3. Generator's Name and Mailing Address	/	The last of the parallel state of the parall	A. Miss	ouri Manifest Docur	nent Nur	mber
MCDONNELL DOUGLAS CORPO	RATION - ST. LOUIS		0	1,2,4,8		0, 2, 0, 8
				Generator's ID - o	MUSEUM STREET	
PO BOX 516, ST. LOUIS, 1 4. Generator's Phone (314) 232-3319	ITSSOURT 03100		O. Otale	Generator a 15 - C		
714 606 0010						
5. Transporter 1 Company Name	6. US EPA ID Number	9 9 1 7		Transporter's ID		
LWD, INC.	KYD08843	0011	D. Tran	sporter's Phone (502)	395-8313
7. Transporter 2 Company Name	8. US EPA ID Number		E. MO.	Transporter's ID		
NONE		T E E E	F. Trans	sporter's Phone		
Designated Facility Name and Site Address	10. US EPA ID Number		G. State	Facility's ID		
LWD, INC.				KYD088438	3817	
PO Box 327, HWY. 1523			L Eaci	ity's Phone		
PU SOX 327, AWI, ISS	12020 FT T D O 9 8 4 3	8817	Control and State Property	502) 395-8	2212	
	42029 K,Y,D,0,8,8,4,3			Committee of the second	S. P. C. Salar	
11. US DOT Description (Including Proper Shipping Nan	ie, Hazard Class, and ID Number)	12. Contain	ers .	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a.						MO.
RQ = X 100 WASTE FAAMM	ABLE LIQUID, N. O. S.					0 4 3
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	an Carteria in 12 A			14.	1 1	Other
1		3 51 10	1	This is		
d.					18.4	MO.
				3	1	Other
				1 1 - 1 - 1		
J. Additional Descriptions for Materials Listed Above		154 100050	K. Hand	lling Codes for Wast	es Listed	Above
a. Flammable liquid CB63	RO = 168 1bs.		T' (1)	6 70	7	
			110	0 10		
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d. Salata and the sal						See also de la cie
15. Special Handling instructions and Additional Informa	tion					2
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IT UNADID TO DILLEVIA I	O DECEMENT LOS LISTENS					
10. OF NEDATOR'S CERTIFICATION: I hereby declare the	t the contents of this consignment are fully and accurately	described above	DV Droco	rehinning name and	ara classii	find packed marked as
	transport by highway according to applicable internation					
Unless I am a small quantity generator who has been ex	empted by statute or regulation from the duty to make a v	vaste minimization	certifica	ation under Section 3	002(b) of	RCRA, I also certify tha
have a program in place to reduce the volume and toxic	city of waste generated to the degree I have determined to the present and future threat to human health and the e	be economically p nvironment.	racticab	le and I have selected	the metr	nod of treatment, storag
Printed/Typed Name	Signature	25144			ng al live	Month Day Yea
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and the same of th	HUETZ Chita		- Le	3		C Charles
17. Transporter 1 Acknowledgement of Receipt of Materi						Date Day You
Fringed/Typed Name	Signature	2/				Month Day Yea
Your BakDEY	Roger	Na	-pl		45	00000
18. Transporter 2 Acknowledgement of Receipt of Maleri	als	P			-	Date
Printed/Typed Name	Signature		× 15	- A	,	Month Day Yea
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19 Discrepancy Indication Space	The East of the Control of the Contr				. 01	Consulation of the
19. Discrepancy Indication Space						
			-5			
20. Facility Owner or Operator: Certification of receipt of	hazardous materials covered by this manifest except as	noted in Item 19.		on a second	7.4	
23. 1 Sample of Special Continuation of Teochylor	//			10.		Date
Printed/Typed Name	Signature //	127	7	* 11		Month Day Yea
	1 American	11/1/10	-	11 //20	35	I Q6 123 137
Form 8700-22 (Rev. 4-85) MDNR-HWG 10		211111	t 12.	5 7 12 11	<u></u>	140 Feet 131
FOR 0700-22 INEV. 4-851 MUNH-HWG 10				Con-	and the same of	in the second se

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TSDF.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102

314-751-3241

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCES
314-634-2436

HAZARDOUS WASTE MANIFEST

	1. 0	· · · · · · · · · · · · · · · · · · ·	1		7		000-0404. Expires 7-3
UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No. 1. 0 D 0 0 0 3 1 1 1	Doc	lanifest ument No. 1 3 7 3	2. Page	-		the shaded areas State law.
3. Generator's Name and Mailing Address		compositores con cita mas e circo con conditiones and con a		A. Miss	ouri Manifest Docum	nent Nu	mber
MCDONNELL DOUGLAS COR		is		-	1 0 0 1	ACCUPATION AND	0 8 7
PO BOX 516, St. Louis 4. Generator's Phone (314) 232-3319	, Missouri			1	Generator's ID - c	ther	
5. Transporter 1 Company Name	6. US EPA ID	Number	* ***	C. MO.	Transporter's ID	H>1	082
LVD, INC.	KI YI DI	0 8 8 4 3 8	8 47	100		502)	395-8313
. Transporter 2 Company Name	8. US EPA IL			-	Transporter's ID		
Designated Facility Name and Site Address	10. US EPA I	ID Number		1.11.1922	Facility's 1D		talenda eta eta eta eta eta eta eta eta eta et
<i>x</i>					KYD08843	8817	
PO BOX 327, EWY \$353	1523				ity's Phone		
1. US DOT Description (Including Proper Shipping N	×2 5	0,88438	12. Contain	100000	395–831	PERMITS AL	
1. US DOT Description (Including Proper Snipping N	ame, Hazard Class, and ID Number)	1	12. Contain	ers	Total Quantity	14. Unit Wt/Vol.	I. Waste No.
	*				1	-	MO. 0 4 3
RQ = 100 WASTE FLAMM	ABLE LIQUID, N. O. 993 (F003, F005, D	S. 7	061	DM	3.41.1.8.0	p	Other D001
FLAMMABLE LIQUID UNI	393 (£003, £003, D	7001)	13-13-1-1-	77 117	124 7 N 1 3 1 U	-	MO.
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		4.		1.5	+ .	2 1	Other
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Additional Descriptions for Materials Listed Above				K. Hand	lling Codes for Wast	es Listed	Above
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		STATE OF THE STATE	2 4/4/ 6	-11	1 1 1		
en de la companya de la companya de la companya de la companya de la companya de la companya de la companya de La companya de la co				TWA T	T 1 1		
5. Special Handling Instructions and Additional Infor	mation				91.53 831-831.		
	TO DESIGNATED TSD	FACILITY,	RETURN	TO	GENERATOR:	" P	X-230
in the second se							
	that the contents of this consignment are f	fully and accurately des	cribed above t	by proper	shipping name and a	ire classi	fied, packed, marked,
G. GENERATOR'S CERTIFICATION: I hereby declare labeled, and are in all respects in proper condition	for transport by highway according to ap	oplicable international a	and national g	overnme	ent regulations and a	pplicable	state regulations.
GENERATOR'S CERTIFICATION: I hereby declare labeled, and are in all respects in proper condition Unless I am a small quantity generator who has been have a program in place to reduce the volume and to	for transport by highway according to ap n exempted by statute or regulation from t exicity of waste generated to the degree!	oplicable international a the duty to make a waste have determined to be e	and national g minimization conomically p	overnme certifica	nt regulations and a tion under Section 3	pplicable 002(b) of	state regulations. RCRA, I also certify tr
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THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TSDF.



63166

Please Remit To:

P.O. BOX 327 - CALVERT CITY, KENTUCKY 42029 D. Inc.

P. O. Box 1440 Paducah, KY 42002-1400

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, MO

DATE:

6/29/87

TERMS:

DUE MET 30

AMOUNT DUE:

DESCRIPTION

QUARTITY TYPE

RAIE

THUOHA

L W D. INC.

MANIFEST # 01248 0207

P.O. # F74985C

CBS4 55 CALLON DRUHS

0865 NON-HAZARDOUS MASTE

MANIFEST # 01001 0878

CB64 55 GALLOH DRUNS

8.34 X SPEC. GRAV. 1.155 =

9.633#/GAL. X % CL 54.4 =

5.240#/GAL, X 55 GAL, DRUH

X 52 DRUMS = 14,986,4# CL

CB64 SURCHARGE ON CHLORINATED NAT 14.988,400 POUNDS

CB65 NON-HAZARDOUS WASTE

C695 NON-HAZARDOUS WASTE 20.000 DRUHS

11.000 DRUHS

32,000 DRUHS

L U D TRUCKING, INC.

TRANSPORTATION BY LUD. INC.

1.000 TRIPS

11,000 08UHS

5.000 DRUHS

TOTAL FOR L U O TRUCKING. THE

TOTAL FOR L U D. INC.

GRAND TOTAL

THIS IS A CONSOLIDATED STATEMENT OF ALL L W D SUBSIDIARIES

PLEASE SEND A COPY OF INVOICE(S) WITH PAYMENT.

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).

OK Den 15 Jul 87 THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

se print or type (Form designed for use on elite (12-pitch) ty UNIFORM HAZARDOUS	1. Generator's US EPA ID N	No.	Manifest	2. Page			the shaded areas
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4. Generator's Phone (314) 232-3319					1248		
5. Transporter 1 Company Name	6. US	EPA ID Number		C. MO. Transp		1_105	22
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INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

EPA Form 8700-22 (Bev. 4-85), MDNR-HWG 10

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102

314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

1

ENERATOR FINAL COPY

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2000-0404. Expires 7-31-86 UNIFORM HAZARDOUS 1. Generator's US EPA ID No Manifest 2. Page _ * Information in the shaded areas Document No. WASTE MANIFEST 41010101010131113191613 0101817 is required by State law 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number MCDONNELL DOUGLAS CORPORATION - ST. LOUIS 0 | 1 | 0 | 0 | 18 17 P.O. BOX 516, ST. LOUIS, MISSOURI 63166 B. State Generator's ID - other 232-3319 4. Generator's Phone (314) 01001 5. Transporter 1 Company Name 6. US EPA ID Number K, Y, D, O, 8, 8 8 LWD, INC. D. Transporter's Phone PART 5021 395-8313 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID NONE F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID EWD, INC. P.O. BOX 327, HIGHWAY 1523 TV0088438817 H. Facility's Phone K, Y, D, O, 8, 8, 4, 3, 8, 8 CALVERT CITY, KENTUCKY 42029 (502) 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Total Unit I. Waste No. Quantity Wt/Vol 0 . , 4 RQ=1 LB. RQ WASTE ORM-A, N.O.S. Other F001 NAL 693 Ε MO. Ε HAZARDOUS WASTE, LIQUID, N.O.S. NI OPM-F MAGTRG MO 0 PHOSPHATE ESTER HEAT TRANSFER FLUID Other HAZARDOHS WASTE N/A d. Other J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above T07 Chlorinated Solvent CB64 TOS h mna T07 Waste Oil (not a federally regulated waste) CR65 **CG95** d. 15. Special Handling Instructions and Additional Information RETURN TO GENERATOR." "IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY, Specific Gravity: 1.1 Chlorine % by Wt.: 54,4 KY-232 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Printed/Typed Name Month Day Year AINIF ma 17. Transporter 1 Acknowledgement of Receipt of Materials Date Day Printed/Typed Name Month 25 100 18/ 18. Transporter 2 Acknowledgement of Receipt of Materials Date Day Printed/Typed Name Signature Month Year 19. Discrepancy Indication Space F Α 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date Signature Printed/Typed Name Month Day Year 06 25 Amos H. Sahlton

THIS



63166

Please Remit To:

P.O. BOX 327 - CALVERT CITY, KENTUCKY 42029 D Inc.

P. O. Box 1440 Paducah, KY 42002-1400

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. D. BOX 516 ST. LOUIS, MO

DATE:

7/20/87

TERMS:

TOTAL FOR L W D, INC.

DUE NET 30

AMOUNT DUE:

DESCRIPTION

QUANTITY TYPE

52.000 DRUMS

28.000 DRUMS

RATE AMOUNT

L U D. INC.

MANIFEST # 01001 0894

F74985C

CB63 55 GALLON DRUMS

55 GALLON DRUMS

8.34 X 1.2363 = 10.311 X % CL 37.0 = 3.815 GAL. X 55 GALLON DRUM X 28 DRUMS =

5.875.1# =

CB64

SURCHARGE ON CHLORINATED HAT 5,875.100 POUNDS

L U D TRUCKING, INC. TRANSPORTATION BY LWD, INC.

200.000 MILES

TOTAL FOR L W D TRUCKING, INC

GRAND TOTAL

OK

THIS IS A CONSOLIDATED STATEMENT OF ALL L W D SUBSIDIARIES

PLEASE SEND A COPY OF INVOICE(S) WITH PAYMENT.

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).

NSTRUCTIONS FOR THE COMPLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

HAZARDOUS WASTE MANIFEST

U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

> - PART GENERATOR FINAL COPY

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TSDF.

I IN LIFE OF THE LIAM AND OF THE	1 . 0				7 1		000-0404. Expires 7-3
UNIFORM HAZARDOUS	1. Generator's US EPA ID N	lo.	Manifest Document No.	2. Page	Inform	ation in	the shaded areas
WASTE MANIFEST	M 0 D 0 0 0 3	$1_{1}3_{1}9_{1}6_{1}3_{1}$	13,0,0,0,0	of	is requ	ired by	State law.
B. Generator's Name and Mailing Address					·Manifest Docu		The state of the s
McDonnell Douglas Corpor	ration - St. Lo	uis		0 1	,0,0,1	. (23	0, 8, 9,
P.O. Box 516, St. Louis,				B. State G	enerator's ID - c	ther	
Generator's Phone (314) 232–3319	0	***			01001		
Transporter 1 Company Name		EPA ID Number			ansporter's ID	77 7 (100
. Transporter i Company Name				and the second	Sec. 12. Mary Control of the Layer	The state of the s	
LUD, Inc.	B10000000000	D 0 3 3 4	31313111/			(502	2) 395-831
. Transporter 2 Company Name	8. US	EPA ID Number		E. MO. Tra	insporter's ID		ALLEY SALES
None				F. Transpo	rter's Phone	de la	
Designated Facility Name and Site Address	10. US	EPA ID Number		G. State Fa	acility's ID		
LND, Inc.				K	YD088438	1817	
P.O. Box 327, Highway 13	523			H. Facility's			
Galvert City, Kentucky	42929 K.Y	D 0 8 8 4	3 4 1 1 7	1	502) 395	. 021	3
US DOT Description (Including Proper Shipping Na		THE RESERVE THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER, THE OWNER, THE	12. Contain		بر <i>حود از کیابات</i> 13.	14.	
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	Timela M O C						MO.
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Flammable Liquid UN19	993 (FUUD, F	OUS, DUQI)	1053	144	12/4/12	P	D001
							MO.
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Additional Descriptions for Materials Listed Above				K. Handlin	g Codes for Wast	es Listed	Above
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Chlorinated Solvent CB				T06	T07	M IS	The Safe
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Special Handling Instructions and Additional Inform	nation						
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"If unable to deliver to KY-236. Lab Samplo Specific GENERATOR'S CERTIFICATION: Thereby declare to	o designated TS e No.: 5321 Gravity: 1.236 hatthe contents of this consignment	3 Chlor ent are fully and accura	ing 5 by 5	elent by proper sh	37,0		
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HCOONNELL DOUGLAS CORPORATION

ACCOUNTS PAYABLE DEPT. 042

P. O. BOX 516

ST. LOUIS, NO

LWD, INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

63166

Please Remit To:

LWD, Inc. P. O. Box 1440

Paducah, KY 42002-1400

DATE:

7/22/87

TERMS:

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AMOUNT DUE:

DESCRIPTION

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	L U D. INC.					
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	EZ49850					
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	.CB64 35 GALLON DRUMS		13.000	08005-	GENERAL	
	CB63 55 GALLON DRUNS			DRUHS -		
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	HCDONNELL DOUGLAS CORPOR	ATION				
	MANIFEST # 01001 0897					
	CB65 NON-HAZARDOUS WAS	TE	2.000	DRUHS -		
	CB65 NON-HAZARDOUS WAS	TE		POUNDS		
	CB63 55 GALLON DRUHS		13.000	DRUHS -		
	CG95 NON-HAZARDOUS WAS	TE	1.000	DRUMS -		
	8.34 X SPEC. GRAV. 1.123	= 9.366#/GAL				
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	X 14 DRUMS = 1.947.33# X					
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	LC48 DRUMS LANDFILL		13.000	DRUHS	477.03	
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PLEASE SEND A COPY OF INVOICE(S) WITH PAYMENT.

i 17 aus

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORMARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102 314-751-3176

B Mc Kee

U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

se print or type (Form designed for use on elite (12-pitch) t	ypewriter.)			Form	Approved. O	MB No. 2	050-0039, Expires 9-30
UNIFORM HAZARDOUS	1. Generator's US EPA ID No.	O G S Docum	nifest nent No.	2. Page	_ Inform	ation in	the shaded areas
WASTE MANIFEST	1111111	7 7 7 10,0	2, 1, 1	of	_ is requ	ired by	State law.
3. Generator's Name and Mailing Address McDonnell Douglas Corpora P.O. Box 516, St. Louis,		ere en electrica de la compansión de la		0,1,	2 4 1 arrator's ID - c	3	nber 0 2 1
4. Generator's Phone (314) 232-3319	4 1	1	in the second	The Real Property of the Control of	248	1 1 1	
5. Transporter 1 Company Name LWD, Inc.	6. US EPA IC	Number 4 3 8 8	3 1 / 1	C. MO. Trans D. Transporte	porter's ID	100000000000000000000000000000000000000	395 - 8313
7. Transporter 2 Company Name	8. US EPA ID) Number		. MO. Trans	porter's ID		
None	1 , , ,			. Transporte	r's Phone	The State	Market - 12 - 12 - 12 - 12 - 12 - 12 - 12 - 1
Designated Facility Name and Site Address	10. US EPA I	D Number		3. State Facil	itv's ID		
LWD, Inc. P.O. Box 327, Highway 152	ş				KYD03	34388	317
Calvert City, Kentucky 4		384388	3 1 7	H. Facility's F	(502)	395-	8313
11. US DOT Description (Including Proper Shipping Name,	O STATE OF THE PROPERTY OF THE PARTY OF THE		12. Container		13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
RQ = 1 Waste Corrosive L Corrosive Material UN1	iquid, N.O.S. 760 (F002)		2011) H ov	>14/a/7	р	MO. 7 0 7 9 Other F002
RQ = 1 Waste ORM-A, N.O., ORM-A NA1693 (FOO1,	S. * F002)	ĺ			5151511	P	MO, A.] Other FCO]
RQ = 100 Waste Flammable Flammable Liquid UN199					(10.5 do 10.0 do 10.5) (10.5 do 10.5 d	D	MO. 0 4 3
d.		DEGLY	34.41	11/16	13,3,3	-	D001 M0. 1 4 4 4
Hazardous Waste, Liquid, ORM-E NA9189	N.U.S.		0,0,7	Mos	29.89	P	Other N/A
J. Additional Descriptions for Materials Listed Above a. Methylene Chloride/Paenol	/Formic Acid CE	168		K. Handling C	Codes for Wast	es Listed	Above I I
 Chlorinated Solvent CB64 Flanmable Liquid CB63 	and the control of th			706 706	TOZ TOZ	And the second second	
d. Waste Nil CE65		ETTER HER ALL		100	7.01		写声 ,心
15. Special Handling Instructions and Additional Information III unable to deliver to	n designated TSD fa 483以Specific 6	ecility, ret Pravity://la	urn to 3 Chlo	genera rine %	ator." by Wt.	: à	7 %
16. GENERATOR'S CERTIFICATION: I hereby declare that the labeled, and are in all respects in proper condition for triff I am a large quantity operator, I certify that I have a prognave selected the practicable method of treatment, storasmall quantity generator, I have made a good faith effort	ansport by highway according to ap ram in place to reduce the volume an ge, or disposal currently available to	pplicable international and d toxicity of waste general me which minimizes the	d national go ted to the deg present and f	vernment reg ree I have det uture threat to	ulations and a ermined to be o human health	pplicable economic and the e	state regulations. ally practicable and tha environment; OR, if I am
Printed/Typed Name ANNETTE C. SCHUE	Signa	ature	C. 4	eli	ut		Month Day Ye
17. Transporter 1 Acknowledgement of Receipt of Materials	i		- /-	11	3		Date
Printed/Typed Name	Signa	ature					Month Day Ye
Jimay Yours	1	- · /A/-		/			0.712/18.
18. Transporter 2 Acknowledgement of Receipt of Materials		and of a	-)			Date
Printed/Typed Name	Signa	ature					Month Day Ye
The state of the s	Signe						
19. Discrepancy Indication Space							
	X1		1		7		
20. Facility Owner or Operator: Certification of receipt of ha	zardous materials covered by this r	manifest except as noted	in Item 19.	~	7		Date
Printed/Typed Name	Signa	ature	, ,		7 7		Month Day Ye
Carry To Minne		**			, Cerr		
Form 8700-22 (Rev. 9-86) MDNR-HWG 10 PREVIOUS EDI	TIONS ARE OBSOLETE						an unga milianamanan kermunakan ancara dan memberia

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

Please print or type (Form designed for use on elite (12-pitch) typewriter.)

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality

Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3176

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC

Form Approved. OMB No. 2050-0039, Expires 9-30-88

1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

UNIFORM HAZARDOUS WASTE MANIFEST 1. Generator's US EPA ID No. M 0 D 0 0 0 8 1 8 9 6 3	Manifest Document No.	2. Page	7		the shaded areas State law.
3. Generator's Name and Mailing Address			ouri Manifest Docur	nent Nu	mber
McDonnell Douglas Corporation - St. Louis		0	1 0 0 1		0 8 9 7
P.O. Box 516, St. Louis, Missouri 63166	140,000		Generator's ID - o		
4. Generator's Phone (314) 232-3319			01001		
5. Transporter 1 Company Name LND, Inc. 6. US EPA ID Number (Y D 0 3 3 4)	3 8 8 1 7	_	Transporter's ID	2 2 2 2	- N-W
7. Transporter 2 Company Name 8. US EPA ID Number		-	sporter's Phone	502)	395-8313
NORE		10000	Transporter's ID		
9. Designated Facility Name and Site Address 10. US EPA ID Number			Facility's ID	A STATE	
LWD, Inc.			KVD088/	12001	7
P.O. Box 327, Highway 1523		H. Facili	ty's Phone	P.JOX 1	
Calvert City, Kentucky 42029 KYD0884;	3 8 3 1 7	1000	(502)	395-8	3313
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Contain	ners	13. Total	14. Unit	I. Waste No.
*			Quantity	Wt/Vol.	1. Wasie No.
· Hazardous Waste Liquid, NOS					M8XXXXXXX
ORM-E NA9189	1	100	- 0 - 1	0	Other
b.	1210 tx		010151216	150	MANA
RQ Waste Flammable Liquid, N.O.S.					MO: 4 3
Flammable Liquid UN1993 (F005, F003, D001)	0.13	b H	9,3,4,0,8	P	Other FOO1
с.	30 12		0 0 7 0 0	-	MO.
					Other
Asbestos-Containing Material	243	DM	034,0,8	D	Other
Wash Phosphale Ester	September 1				MO.
				10	Other
Not D.O.T. Regulated	901	or personal contract words	0,012,518	11	
J. Additional Descriptions for Materials Listed Above	i dana	K. Hand	ling Codes for Wast	es Listed	Above
a. Keadle Oil CBUS b. Flammable Liquid RQ = 100 lbs. CB83	ATEMPTORIAL CONTRA	1	1 11		
			4 4.01		
	Cara Maria da Antonio	all the same		tile samb	
c. Asbestos LC#8			1 1 1		
c. Asbestos LC#8					
e Asbestos LCA8 ofhosologic Ester CG45	return to	Ten.	erator."		
c. Asbestos LC#8 d. Phosolarate Ester & G95 15. Special Handling Instructions and Additional Information	return to	o cer	1 1 1 1 1 1 1 1 erator."		
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d. Asbestos LCR8 d. Asbestos	ely described above	by proper governmen	shipping name and a nt regulations and a	pplicable	e state regulations.
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CALVERT CITY KY

LWD, INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

Please Remit To: LWD, Inc. P. O. Box 1440 Paducah, KY 42002-1400

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, MO 63166

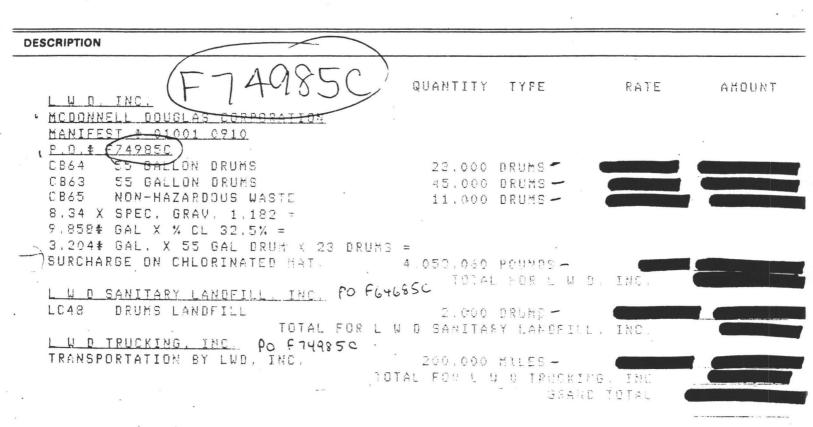
DATE:

8/10/87

TERMS:

DUE NET 30

AMOUNT DUE:



PLEASE SEND A COPY OF INVOICE(S) WITH PAYMENT.

Total due row assc =

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERSENT FER-MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).

OK ben 26 aug 8 INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

EPA Form 8700-22 (Rev. 9-86) MDNR-HWG 10 PREVIOUS EDITIONS ARE OBSOLETE

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3176

HAZARDOUS WASTE MANIFEST

B Mckey

U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300

DEPT. OF NATURAL RESOURCES 314-634-2436

	h) typewriter.)				Tom Approved. C	/WID 140. Z	050-0039, Expires 9-30-8
UNIFORM HAZARDOUS	1. Generator's US EF	Do	Manifest cument No.	2. Page	Inform	nation in	the shaded areas
WASTE MANIFEST	M'0'D'0'0		מודופור	of _	is requ	uired by	State law.
3. Generator's Name and Mailing Address McDonnell Douglas Corpor P.O. Box 515, St. Louis,				0 1	Ouri Manifest Docu		mber 0 9 1 0
4. Generator's Phone (314) 232-3319				28.0	01001		
5. Transporter 1 Company Name	4	6. US EPA ID Number		C. MO.	Transporter's ID	H_10	82
LWD, Inc.		[4, Y, D, 0, 8, 8, 4, 3, 8	3 8 1 7	D. Tran	sporter's Phone	502)	395-8313
7. Transporter 2 Company Name		8. US EPA ID Number		E. MO.	Transporter's ID	174	
None				7770	sporter's Phone		
Designated Facility Name and Site Address		10. US EPA ID Number		150 Tu	Facility's ID		
IMD, Inc.	0.0				KYD0384388	317	
P.O. Box 327, Highway 15		1777088/38	917	H. Facil	ity's Phone		- 1100000000000000000000000000000000000
Calvert City, Kentucky		K, Y, D, 0, 8, 8, 4, 38			(502) 395-	7	
US DOT Description (Including Proper Shipping Nat	me, nazard Class, and IL	J Number)	12. Containe	ers	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
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RQ = 100 lbs. Waste T Flammable Liquid UN19	lammable Li. 93 (FCO5	quid, N.O.3. , F003, D001)	046	D, M	1,7,7,3,0	P	0 6 6 6 7 3 Other D001
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ORM-E NA9139			7111	D 22	0,4330	-	MO.
Asbestos-containing Mate	rial		100	n M	0078	o P	Other
Additional Descriptions for Materials Listed Above	i de ade (illenia		UIUEA	(FURNISHED REPORTED AT	dling Codes for Was	OCCUPATION DESCRIPTION	Above
Chlorinated Solvent CB6	4			T0		3-1-43	
Flammable Liquid CB63			Abril Esta	10	6, 707	£ 3%	
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63166

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029 Remit To:

EWD Inc. P. O. Box 1440 Paducah, KY 42002-1400

MCDONNELL BOUGLAS CORPURATION ACCOUNTS PAYABLE BEPT. 042 P. O. BOX 516 ST. LOUIS, MO

DATE:

8/14/87

TERMS:

DHE HET 30

AMOUNT DUE:

DESCRIPTION

QUANTITY TYPE

RATE

THUOHA

L W D. INC.

HANIFEST # 01248 0214

P.O. # F74985C

CB63 55 GALLON DRUNS

MANIFEST # 01001 0725

P.O. # F74985C

CB65 NON-HAZARDOUS WASTE

13.000 DRIMS

59.000 DRUHS

9.000 DRUHS

TOTAL FOR L U D, THE.

CG75 NON-HAZARDOUS WASTE

L W D TRUCKING, INC. TRANSPORTATION BY LUD, INC.

200,000 HILES

TOTAL FOR L U O TRUCKTHG, THE

GRAND TOTAL

ber 36 Que 8

THIS IS A CONSOLIDATED STATEMENT OF ALL L U D SUSSIDIARIES

PLEASE SEND A COPY OF INVOICE(S) WITH PAYHENT.

IF NOT PAID IT
RECEIPT, A CARTHANO CHARGE OF
ONE & ONE-HALF PERCENT PER MONTH
WILL BE ADDED (TOTAL ANNUAL RAYE,
18%).

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program

P.O. Box 176 Jefferson City, Missouri 65102 314-751-3176

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on elite (12-pitch) typewriter.) Form Approved, OMB No. 2050-0039, Expires 9-30-88 1. Generator's US EPA ID No. UNIFORM HAZARDOUS Information in the shaded areas Document No. M, O, D, O, O, O, 8, 1, 8 6 0,0,2 **WASTE MANIFEST** is required by State law. 3. Generator's Name and Mailing Address A. Missouri Manirest Document Number 1 2 4 8 McDonnell Douglas Corporation - St. Louis 0 P.O. Box 516, St. Louis, Missouri 63166 B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 01248 5. Transporter 1 Company Name 6. US EPA ID Number C. MO. Transporter's ID H-1082 K, Y, D, 0, 8, 8, 4, 3, 8, 8, 1, 7 LWD. Inc. D. Transporter's Phone (502) .395-8313 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID -LWD, Inc. KYD068438817 COPY P.O. Box 327, Highway 1523 H. Facility's Phone Calvert City, Kentucky 42029 K, Y, D, O, 8, 8, 4, 3, 8, 8, 1, 7 (502) 395-8313 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 12. Containers ENERATOR FINAL 13. Quantity Wt/Vol 0 RQ Waste Flammable Liquid, N.O.S. Other Flammable Liquid UNI1993 (F005, F003, D001) D001 GHZHR MÛ. Other MO. 0 Other MO. Other J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above AFTER ITS RETURN FROM a CB63 Flammable Liquid RQ = 100 lbs. T06 T07 15. Special Handling Instructions and Additional Information "If unable to deliver to designated TSD facility, return to generator." 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. GENERATOR If I am a large quantity operator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method available to me that I can afford. Printed/Typed Name Day Year 6-SCHUET 8/13 出土 17. Transporter 1 Acknowledgement of Receipt of Materials Date TRANSPORTER Day Printed/Typed Name Signature Month BY BE RETAINED Date 18. Transporter 2 Acknowledgement of Receipt of Materials 6 Day Month Printed/Typed Name Signature 19. Discrepancy Indication Space F COPY MUST A 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date Day Year THIS (Printed/Typed Name Signature Month



P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

63166

Please Remit To: LWD, Inc. P. O. Box 1440 Paducah, KY 42002-1400

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, MO

DATE:

8/31/87

TERMS:

DUE NET 30

AMOUNT DUE:

SCRIPTION

QUANTITY TYPE

- 25.000 DRUMS

RATE AMOUNT

U D. INC. MANIFEST P.O. # (F74985C 55 SALLON DRUMS 8.34 X SPEC. GRAV. 1.385= 11.551*/GAL. X % CL 61.0 =

7.046#/GAL X 55 GAL. DRUM

X 57 DRUMS = 22,089.21 CL

SURCHARGE ON CHLORINATED MAT 22.089.210 POUNDS-

- 16.000 DRUMS

55 GALLON DRUMS

- 32,000 DRUMS

TOTAL FOR L W D, INC.

W D SANITARY LANDFILL.

LC48 DRUMS LANDFILL

. 5.000 DRUKS

TOTAL FOR L 4 D SANITARY LANDFILL, INC.

L W D TRUCKING, INC.

TRANSPORTATION BY LWD, INC.

200,000 HILES

TOTAL FOR & W.O. TRUCKING, INC

GRAND TOTAL

total due for 60 EJA836C

A CONSOLIDATED STATEMENT OF ALL L U O SUSSIDIARIES

PLEASE SEND A COPY OF INVOICE(S) WITH PAYMENT.

VENDOR CO.

09 11

WILL DE ADOED WATER AMERICAN PARTE, 10,00

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HAZARDOUS WASTE MANIFEST

Ple	ase print or type (Form designed for use on elite (12-pitch) ty	pewriter.)			Form Approved. OI	MB No. 2	050-0039, Expires 9-30-88	3
A	UNIFORM HAZARDOUS	Generator's US EPA ID No.	Manifest	2. Page	Inform	ation in	the shaded areas	7
1	WASTE MANIFEST	8 9 9 8 1 8 0 0 0 6 3	Document No.	of .	is requ	ired by	State law.	
П	3. Generator's Name and Mailing Address		2 19 15 19 19		ouri Manifest Docur	nent Nu	mber	1
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П				_	e Generator's ID - o	Marian Marian Street	0 19 15 16	-
П	P.O. Box 516, St. Louis, M 4. Generator's Phone (314) 232-3319	issouri 63166		D. State	CHARGO AL ARCHEO	uner		
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П	7. Transporter 2 Company Name	8. US EPA ID Number		E. MO.	Transporter's ID			AB
	None		1 1 1 1	F. Tran	sporter's Phone			0
П	9. Designated Facility Name and Site Address	10. US EPA ID Number		G, Stat	e Facility's ID			1
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	LWD, Inc.			H Faci	KYD0884 lity's Phone	2007		OPY
	P.O. Box 327, Highway 1523			100				0
	Carvert City, Kentucky 42				(502) 3	7	313	O
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EPA Form 8700-22 (Rev. 9-86) MDNR-HWG 10 PREVIOUS EDITIONS ARE OBSOLETE

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HAZARDOUS WASTE MANIFEST

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LWD, INC. Flagge Remit To:

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

63166

P. O. Box 1440 Paducah, KY 42002-1400 /

HODDNNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, NO

DATE:

9/14/87

TERMS:

DHE NET 30

AMOUNT DUE:

DESC	RIPT	TION
------	------	------

QUANTITY TYPE

· 18.000 ARHHS

41,000 Deuns

14,000 BRUHS

RATE

AHOUNT

L H D. INC.

MANIFEST # 01001 0977

P.O. * F749850

0864 55 GALLON DRUNS

CB63 55 GALLON DRUMS

MANIFEST # 01248 0219

CB63 55 GALLON DRUMS

8.34 X SPEC. GRAV. 1.006 =

8.39 X % CL 1.87 =

0.15 X 55 GAL, DRUH X

18 DRUHS = 148.50#

CB64 SURCHARGE ON CHLORINATED HAT

148.500 POUMDS

TOTAL FOR L U D, INC.

L U D SANITARY LANDFILL, INC.

LC48 DRUMS LANDFILL

A 000 DRIHS

TOTAL FOR L U D SANITARY LANDEILL, INC.

L W D TRUCKING, INC.

TRANSPORTATION BY LUD, INC.

200,000 HILES

TOTAL FOR L U D TRUCKING, INC

GRAND TOTAL

OK

* THIS IS A CONSOLIDATED STATEMENT OF ALL L U D SUBSIDIARIES

* PLEASE SEND A COPY OF INVOICE(S) WITH PAYHENT.

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERGENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS. MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program

P.O. Box 176 Jefferson City, Missouri 65102 314-751-3176 HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

Plea	ase print or type (Form designed for use on elite (12-pitch)	typewriter.)			Form A	pproved. Of	иВ No. 20	050-0039,	Expires 9-30	0-88	
A	UNIFORM HAZARDOUS 1. Generator's US EPA ID No.			anifest	2. Page Information in the shaded areas						
7	WASTE MANIFEST	M, 0, D, 0, 0, 0, 8	1 3 9 6 3 0 0	9,7,7	of	is requ	ired by	State law			
	3. Generator's Name and Mailing Address					ifest Docum	nent Nun	nber		i na	
	McDonnell Douglas Corporation - St. Louis				0,1,0,0,1 0,9,7,7						
	P.O. Box 516, St. Louis, M	issouri 61166	166			B. State Generator's ID - other					
	4. Generator's Phone (314) 232-3319		01001								
	5. Transporter 1 Company Name	6. US E	PA ID Number	C. MO. Transporter's ID H-1082 D. Transporter's Phone (502) 395-3313 E. MO. Transporter's ID							
	LWD, Inc.										
	7. Transporter 2 Company Name	The second secon	PA ID Number								
	None						**************************************				
	9. Designated Facility Name and Site Address 10. US EPA ID Number					F. Transporter's Phone					
		10. US 1	EPA ID Number	G. State Facility's ID KYD088438817							
	LWD, Inc.				The State of the S						
					H. Facility's Phone						
	Calvert City, Kentucky 42029 [K, Y, D, 0, 8, 8, 4, 3, 8, 1, 7]										
	11. US DOT Description (Including Proper Shipping Name	e, Hazard Class, and ID Numbe	er)	12. Containe		13. Fotal Jantity	14. Unit Wt/Vol.	1. W	aste No.		
	a.							MO.			
	RQ = 1 lb. Waste ORM-A, N.O.S.							U	4 1	L	
G	OWN-A NA1693 (F001, F002)		2.1		D, Mo 6	9.6.6	p	Other FOO	1		
G E	b.					. 100100	-	MO.			
NE	RQ = 100 lbs. Waste Fla	mmable Liquid	M.O.S.					0	4,	3	
R	Flanmable Liquid UN1993 (F005, 1			5.4.1	D/ 1/15	9.72	P	Other D00	1		
A	c. (714)				-1 -1 1 -1		-	MO.	· Description		
0			0					18.18		912	
R	Asbestos-containing Materi	-7	B McKee	006	D. Wal	011	P	Other			
	ASDESTOS-CONTRAINING MATERIA	41.		2 0 0	10 10 0	11213		MO.	in a same		
	u.							1			
								Other			
	Weg Compact には、100mmのでは、100m				K. Handling Codes for Wastes Listed Above						
1	a Chlorinated Solvent CB64			T06 T07			1713 4515				
1	b Flaumable Solvent CB63		TQ6	平0万	1 1	1	1:1				
1	c Asbestos LC48			200	1-1-	1171		7-1		70	
									24		
1	15. Special Handling Instructions and Additional Information										
	"If unable to deliver to designated TSD facility, return to generator." KY-245										
	Lab Sample Number: 4883 Specific Gravity: 1.006 Chlorine % by Wt.: 1.8 %										
	16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and										
	labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations.										
1	If I am a large quantity operator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a large quantity operator, I would not be a seed for the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a										
1	small quantity generator, I have made a good faith effort	rt to minimize my waste genera	ation and select the best waste	managemer	nt method availab	le to me tha	t I can aff	ord.	- :		
T	Printed/Typed Name		Signature	_	1.		=	Month	Day Ye	ar	
Y	ANNETTE C. SCHUE	72	(100 100 m	C. 1	Selve	5		07	108	7	
TP	17. Transporter 1 Acknowledgement of Receipt of Materia	ls				-			Date		
A	Printed/Typed Name Signature							Month	Day Ye	ear	
S	13 Ruce Invilor	BRUCE TAULOR							11/8	7	
TRANSPORTER	18. Transporter 2 Acknowledgement of Receipt of Materials								Date		
H	Printed/Typed Name		Signature	*			Month	Day Ye	ear		
R								1, 1	. 14	1	
10	19. Discrepancy Indication Space	N. J. C. C. C.									
F											
A											
C		The state of the s									
L	20. Facility Owner or Operator: Certification of receipt of	nazardous materials covered by	this manifest except as noted	d in Item 19.		(·	*			-	
1			1						Date		
TY	Printed/Typed Name		Signature		4 4			Month	Day Ye	ear	
10	Amos 4. Shelton		1011.11		1			- 1	- 1	-	

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality

Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3176

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES

Please print or type (Form designed for use on elite (12-pitch) typewriter.) Form Approved OMB No. 2050-0039, Expires 9-30-88 1. Generator's US EPA ID No. UNIFORM HAZARDOUS Manifest Information in the shaded areas Document No. M, O, D, O, O, O, 3WASTE MANIFEST is required by State law. 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number McDonnell Douglas Corporation - St. Louis 4 8 0 P.O. Box 516, St. Louis, Missouri 63166 B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 01248 5. Transporter 1 Company Name C. MO. Transporter's ID H-1082 K, Y, D, 0, 8, 3 D. Transporter's Phone (502) 395-8313 LWD, Inc. PART 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID None F. Transporter's Phone 1 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID LWD, Inc. COPY KYD088438817 P.O. Box 327, Highway 1523 H. Facility's Phone (502)Calvert City, Kentucky 42029 K, Y, D, O, 8, 8, 4, 3, 8, 8, 17 395-8313 FINAL 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Unit I. Waste No. Total Quantity Wt/Vol OOM 3 4 RQ = 100 lbs. Waste Flammable Liquid, N.O.S. ENERATOR Other DOOL UN1993 (F005, F003, D001) Flammable Liquid G N MO. E Othe A MO. LRE 0 R Other d MO Other J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above FROM TO6 TOT Flammable Solvent 15. Special Handling Instructions and Additional Information AFTER ITS "If unable to deliver to designated TSD facility, return to generator." 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. GENERATOR If I am a large quantity operator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator. I have made a good faith effort to minimize my waste generation and select the best waste management method available to me that I can afford. Day Year Printed/Typed Name Signature Month THE 17. Transporter 1 Acknowledgement of Receipt of Materials Date TRANSPORTER Day Printed/Typed Name Signature Month COPY MUST BE RETAINED BY Date 18. Transporter 2 Acknowledgement of Receipt of Materials Day Printed/Typed Name Signature 19. Discrepancy Indication Space F A 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. L Date Day THIS Printed/Typed Name Signature o (Louer

LWD, INC.

Please Remit To:

Faducah, NY 435

P.O. BOX 327 - CALVERT CITY, KENTUCKY 42029 0. 80. 1440

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, MO 53166

DATE:

9/18/87

TERMS:

DUE HET 30

AMOUNT DUE:

DESCRIPTION

QUANTITY TYPE

19,000 DRUMS

20.000 0RUHS

35.000 DRUMS

PATE

THUOMA

L U D. INC.

MANIFEST # 01248 0222

P.O. # FZ4985C

CB64 55 GALLON DRUHS

C863 55 GALLON DRUMS

NAHIFEST # 01001 0987

55 GALLON DRUNS

8.34 X SPEC, GRAV, 1.389 =

11.58#/GAL. X % CL 65% = 7.521/ GAL. X 55 GAL. DRUH

X 19 DRUMS = 7,858

L U D TRUCKING, INC.

CB64 SURCHARGE ON CHLORINATED HAT 7,858,400 POURDS TOTAL FOR L U D, INC.

TRANSPORTATION BY LUD, INC.

200.000 HILES

TOTAL FOR L W D TRUCKING, INC GRAND TOTAL

THIS IS A CONSOLIDATED STATEMENT OF ALL L U D SUBSTDIARIES

* PLEASE SEND A COPY OF INVOICE(S) WITH PAYMENT.

IF NOT PAID WITHIN SO DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3176

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCES
314-634-2436

Please print or type (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039, Expires 9-30-88 1. Generator's US EPA ID No UNIFORM HAZARDOUS 2. Page . Information in the shaded areas Document No. 2 WASTE MANIFEST $M_1O_1D_1O_1O_1O_1S_11_1S_19_1O_16_1O_1$ is required by State law 3. Generator's Name and Mailing Address A Missouri Manifest Document Number McDonnell Douglas Corporation - St. Louis 11,2,4,8 P.O. Box 516, St. Louis, Missouri 63166 B. State Generator's ID - other 232-3319 01248 4. Generator's Phone (314) 5. Transporter 1 Company Name C. MO. Transporter's ID H-1082 6 US FPA ID Number D. Transporter's Phone (502) 395-8313 LWD, Inc. K, Y, D, O, 8, 8, 4, 3, 8, 3, 1, 7 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID PA None F. Transporter's Phone 1 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID LWD, Inc. KYD088438817 COPY P.O. Box 327, Highway 1523 H. Facility's Phone Calvert City, Kentucky 42029 (502) 395-8313 0, 88 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) FINAL 12. Containers Total Unit I. Waste No. Quantity Wt/Vol MO O 4 ENERATOR Waste ORM-A. N.O.S. RO = 1 1b.Other MA1693 (F001, F002) F001 0 NER 4 3 RO = 100 1bs. Waste Flammable Liquid, N.O.S. Other (F005, F003, D001) D001 Flammable Liquid UN1993 MO. 0 Mckee Other MO Other J. Additional Descriptions for Materials Listed Above RETURN FROM T06 TO7 a Chlorinated Solvent CB 64 CB 63 h Flancable Solvent 15 Special Handling Instructions and Additional Information ITS "If unable to deliver to designated TSD facility, return to generator." Lab Sample Number: 4924 Specific Gravity: 1.389 Chlorine % by Wt.: 65% 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. GENERATOR If I am a large quantity operator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method available to me that I can afford. Printed/Typed Name Signature 0911 BY THE 17. Transporter 1 Acknowledgement of Receipt of Materials Date Day Signature RETAINED 18. Transporter 2 Acknowledgement of Receipt of Materials Date Day Printed/Typed Name Signature Month 19. Discrepancy Indication Space BE COPY MUST C 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19 Date Day Month THIS (Printed/Typed Name

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3176

U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCES
314-634-2436

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039, Expires 9-30-88 UNIFORM HAZARDOUS Manifest 2. Page ____ Information in the shaded areas Document No. M, O, D, O, O, O, 8, 1, 8, 9, 6, 3 10 WASTE MANIFEST is required by State law 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number McDonnell Douglas Corporation - St. Louis 1,0,0,1 P.O. Box 516, St. Louis, Missouri 63166 B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 01001 H-1082 5. Transporter 1 Company Name 6. US EPA ID Number C. MO. Transporter's ID S LWU, Inc. K, Y, D, O, S, S, 4, 3, 8, 8, D. Transporter's Phone 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID KYD083438817 LWD, Inc. GENERATOR FINAL COPY P.O. Box 327, Highway 1523 H. Facility's Phone Calvert City, Kentucky 42029 Y.D. (502) 395-8313 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 13. 12. Containers Total Unit I. Waste No Quantity Wt/Vol. Waste ORM-A. W.O.S. Othe WHI695 TEGET TGGET E RO = 100 lbs.Waste Flammable Liquid, N.O.S. Othe UN1993 (F005, F003, D001) Flammable Liquid MO. B Mckee 0 R Other J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above **GENERATOR AFTER ITS RETURN FROM** a Ghlorinated Solvent CB68 b. Flammable Solvent **CB63** 15. Special Handling Instructions and Additional Information "If unable to deliver to designated TSD facility, return to generator. Specific Gravity: Lab Sample Number+ 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. If I am a large quantity operator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method available to me that I can afford. Year Printed/Typed Name Signature Month A NNETTE BY THE Date 17. Transporter 1 Acknowledgement of Receipt of Materials Day Year Month RETAINED 18. Transporter 2 Acknowledgement of Receipt of Materials Date Day Printed/Typed Name Signature Month Year 19. Discrepancy Indication Space COPY MUST C 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date Day Month THIS (Printed/Typed Name lean / c chiney



L W.D., INC.

Please Remit To:

P.O. BOX 327 - CALVERT CITY, KENTUCKY 42029 LWD Inc.

63166

P. O. Box 1440 Paducah, KY 42002-1400

MCOONHELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. D. BOX 516 ST. LOUIS, MO

DATE:

10/08/87

TERMS:

DHE HET 30

AMOUNT DUE:

DESCRIPTION

QUANTITY TYPE

RATE

AHOUNT

L U D. INC. PICK UP DATE 10/07/87 MAHIFEST # 01001 1001 P.O. # F74985C 6864

55 GALLUN DRUMS CB33 55 GALLON DRUMS

NON-HAZARDOUS WASTE

X % CL = 0.098#/GAL X 55 GAL. DRUN X 25

8.34 X SPEC. GRAV. 1.099 = 9.166#/GAL.

DRUHS = 134.75# X UPCHARGE ON CHLORINATED MAT.

L W D TRUCKING. INC. TRANSPORTATION BY LUD, INC. 25,000 DRUHS

10.000 URUHS

44,000 DRUHS

- 134.750 POUNDS

TOTAL FOR L U B, THC.

TOTAL FOR L U D TRUCKING, INC

200,000 HILES

GRAND TOTAL

THIS IS A CONSOLIDATED STATEMENT OF ALL L U D SUBSIDIARIES

PLEASE SEND A COPY OF INVOICE(S) WITH PAYMENT.

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).



MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 THIS DOCUMENT MUST BE USED 314-751-3176 FOR ALL MISSOURI-DESTINED

BMCKER

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039, Expires 9-30-88 1. Generator's US EPA ID No UNIFORM HAZARDOUS Information in the shaded areas Document No. 1 M, O, D, O, O, 0, 8 WASTE MANIFEST is required by State law 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number McDonnell Douglas Corporation - St. Louis 1 0 0 1 P.O. Box 516, St. Louis, Missouri 63166 B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 01001 5. Transporter 1 Company Name 6 US FPA ID Number C. MO. Transporter's ID LWD, Inc. K, Y, D, 0, 8, 8 4 3 8 8 1 7 D. Transporter's Phone (502) PART 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID None F. Transporter's Phone 9. Designated Facility Name and Site Address 1 10. US EPA ID Number G. State Facility's ID LWD, Inc. KYD088438817 GENERATOR FINAL COPY P.O. Box 327, Highway 1523 H. Facility's Phone Calvert City, Kentucky 42029 (502):395-8313 IK, Y, D, O, S, 8, 4, 3, 8 8.1.7 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Unit I. Waste No. Quantity Wt/Vol RQ = 1 1b.Waste ORM-A. N.O.S. ORM-A (F001, F002) NA1693 G F Six N R0 = 100 lbs.Waste Flammable Liquid, N.O.S. Other UN1993 (F005, F003, D001) Flammable Liquid 3,9,00 0 Hazardous Waste, Liquid, N.O.S. ORM-E NA9189 D. M Otiner J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above RETURN FROM a Chlorinated Solvent CB 64 T06 b. Flammable Liquid CB 63 FO Waste Oil **CB65** TO 15. Special Handling Instructions and Additional Information AFTER ITS return to generator." "If unable to deliver to designated TSD facility, Lab Sample Number: 4947 Specific Gravity: 1-0 Chlorine % by Wt.: 1.07 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. If I am a large quantity operator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method available to me that I can afford. Printed/Typed Name Day 0718 NNETTE SCHUETZ Date 17. Transporter 1 Acknowledgement of Receipt of Materials Day Month Printed/Typed Name Signature loud 18. Transporter 2 Acknowledgement of Receipt of Materials Month Day .Printed/Typed Name Signature 19. Discrepancy Indication Space A C 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19 Signature Day Printed/Typed Name

COPY MUST BE RETAINED BY THE GENERATOR THIS

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Please print or type (Form designed for use on elite (12-pitch) typewriter.)

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program

Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3176

EMERGENCY RESPONSE
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1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCES
314-634-2436

Form Approved, OMB No. 2050-0039, Expires 9-30-88

HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **UNIFORM HAZARDOUS** 2. Page __ Information in the shaded areas Document No. **WASTE MANIFEST** M, O, D, O, O, O, 8, 1, 8, 9, 6, 3 D is required by State law 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number McDonnell Douglas Corporation - St. Louis 0 P.O. Box 516, St. Louis, Missouri 63166 B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 01001 5. Transporter 1 Company Name 6. US EPA ID Number C. MO. Transporter's ID H-1082 K, Y, D, 9, 8, 1, 4, 7, 7, 8, 2, 1 LWD Trucking, Inc. D. Transporter's Phone (502) 395-8313 PART 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID None F. Transporter's Phone 9. Designated Facility Name and Site Address 1 10. US EPA ID Number G. State Facility's ID LWD, Inc. KYD088438817 COPY P.O. Box 327, Highway 1523 H. Facility's Phone K, Y, D, O, 8, 8, 4, 3, 8, 8, 1, 7 Calvert City, Kentucky 42929 (502) 395-8313 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) GENERATOR FINAL 12. Containers Total Unit I Waste No Quantity Wt/Vol. 4 n R0 = 1 1b.Waste ORM-A, N.O.S. F001 NA1693 (F001, F002) P G Ε N . . 4 Ε RQ = 100 lbs. Waste Flammable Liquid, N.O.S. Other R Flammable Liquid (F005, F003, D001) UN1993 D001 A MO. OR B Mctoe Other MO. Other J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above RETURN FROM Chlorinated Solvent CB64 T06 T07 Flammable Solvent CB63 15. Special Handling Instructions and Additional Information **GENERATOR AFTER ITS** KY-250 "If unable to deliver to designated TSD facility, return to generator." Lab Sample Number: 5378 Specific Gravity: 1. 13d Chlorine % by Weight: 2d 0 % 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. If I am a large quantity operator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment, OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method available to me that I can afford. Printed/Typed Name Month Day Year 011,918 ANNETTE C SCHUETZ THIS COPY MUST BE RETAINED BY THE THE TSDF. 17. Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name Day Signature Month 1019 10410 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Month Day 19. Discrepancy Indication Space F A C 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Month Day Printed/Typed Name Signature Kean McKinney EPA Form 8700-22 (Rev. 9-86) MDNR-HWG 10 PREVIOUS EDITIONS ARE OBSOLETE

INSTRUCTIONS FOR THE COMPLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3176

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

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70: Bryan Kury

MICDONNELL AIRCRAFT CONTAINS

Box 516, Saint Louis, Missouri 63166 (314) 232-0232

1 September 1987

RECEIVED INDUSTRIAL SCLVENTS - FLORE

Safety-Kleen Corporation P.O. Box 1419 Elgin, IL 60120

SFP 1 0 1937

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MDC Sale 14-87, Award of Waste Trichloroethylene KEF:_____FILE____

Gentlemen:

1. This is to inform you that you have been awarded the following material included in subject sale.



- 2. Removal arrangements will be coordinated with Annette Schuetz, telephone (314) 233-1107. Trichloroethylene accumulations are to be picked up in 55 gallon drums at Bldg. 27 and Bldg. 101.
- 3. Your bid and Exhibit B indicated that you have been issued Hazardous Waste Transporter License No. H-1273 and Hazardous Waste Recycling Permit No. 0316000053 for Illinois and Illinois Facility No. 1980-39-0P.
- 4. You will be informed when to remove waste Trichloroethylene from MDC facilities. Removals must be accomplished between the hours of 8:00 A.M. and 2:00 P.M., Monday thru Friday. Trailers will be rejected if they are not the proper nature or in poor condition as to cause loss of material during transit or otherwise do not comply with D.O.T. requirements.
- 5. Each removal will be accompanied by an Illinois Hazardous Waste Manifest. Within two weeks after receipt of the Trichloroethylene at Safety-Kleen Corp., the completed Generater's copies of the manifest shall be returned to: Environmental Compliance, Dept. 891C, McDonnell Douglas Corp., P.O. Box 516, St. Louis, MO 63166, Attn: Mr. B. McKee.
- Safety-Kleen Corp. will be required submit a copy of their EPA registration number, State Facility number, and Missouri Transport license documents to: Environmental Compliance, Dept. 891C, McDonnell Douglas Corp., P.O. Box 516, St. Louis, MO 63166, Attn: Mr. B. McKee before the material will be shipped from MDC.
- 7. Your attention is invited to Para. 7 of Conditions of Sale, regarding payment for material. It is the decision of our Credit Dept. to waive the requirements of a cash deposit so long as payment for delivered material is made within 10 days from date of invoice as specified in terms of the sale. Remittances should be made payable to McDonnell Douglas Corporation and forwarded to: Cashier, McDonnell Douglas Corp., P.O. Box 516, St.Louis, Missouri 63166.



1 September 1987

- 8. In accepting this award, the purchaser certifies to MDC that disposition of the solvent will be in compliance with all applicable EPA, State and Local rules and regulations regarding Hazardous Waste.
- 9. Should Safety Kleen Corp., during the terms of the contract, be unable to operate as a hazardous waste facility, and therefore unable to receive hazardous waste, at its option, cancel the contract without penalty. Plus MDC, at its option, has the right to cancel this contract by notifying Safety-Kleen Corp., 10 days from date of this letter, without penalty.
- 10. This award is subject to all terms and conditions in MDC Sale 14-87, dated 23 March 1987.

11. Please return one copy back with signatures to the undersigned.

Very truly yours,

W. Earl Campbell

Salvage & Reclamation Coord.

Dept. 764, Bldg. HQ

WEC: le/WEC.F32

Accepted by Safety-Kleen Corp.

Authorized Signature

Alex M. Freeman

Title General Sales Manager

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EPA Form 8700-22 /Rev. 9-86) MDNR-HWG 10

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
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CHEM TREC
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Please print or type (Form designed for use on elite (12-Pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88 1. Generator's US EPA ID No. 2. Page 1 **UNIFORM HAZARDOUS** Manifest Document No Information in the shaded areas TO HOSP WASTE MANIFEST of is required by State law 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number 112141 0-3-2-4 63166 5-5339 391C B. State Generator's ID - other St. Louis, 4. Generator's Phone (314) N 5. Transporter 1 Company Name 6. US EPA ID Number H-1273 C. MO, Transporter's ID ILD051060408 PART CORP 314/441-0104 D. Transporter's Phone 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID F. Transporter's Phone 1 9. Designated Facility Name and Site Address G. State Facility's ID 10. US EPA ID Number HH-0023 4526 Towne Ct. d Harvestowne Ind. Dr. 000 H. Facility's Phone 314/441-0104 St. Charles, MO 63303 MOD095486312 FINAL 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID NUMBER) 12. Containers 13 Unit I. Waste No Total Quantity Wt/Vol TIELE MO BOOLO NAPHIHA ID, UN1155 TY: DOG: ENERATOR D Other 00 G IUZER lb. MO. 2002701 Other EPA, TOXICITY Food A MO. O 0 R Other MO. d. Other FROM K. Handling Codes for Wastes Listed Above J. Additional Descriptions for Materials Listed Above RETURN DOUL LUUZ FIS 15. Special Handling Instructions and Additional Information FACILITY AFTER Ter. 06 WK8735 RETURN TO GENERATOR 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable GENERATOR state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, If I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. Printed/Typed Name Signature Month Day Year TNNETTE C SCHUETZ 090,318, THE 17. Transporter 1 Acknowledgement of Receipt of Materials Date BY Month Printed/Typed Name Day SON RETAINED 0. 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name Day Signature Month 19. Discrepancy.Indication Space III B F MUST A C 100 500 500 COPY TSDF. 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date Day Printed/Typed Name Month Signature Year

MISSOURI DEPARTMENT OF NATURAL RESOURCES

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET.

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HAZARDOUS WASTE MANIFEST

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